

# St. Bartholomew's Hospital



"Æquam memento rebus in arduis  
Servare mentem."  
—Horace, Book ii, Ode iii.

## JOURNAL.

VOL. XL.—No. 12.]

SEPTEMBER 1ST, 1933.

PRICE NINEPENCE.

### CALENDAR.

Fri.,	Sept. 1.	—Prof. Fraser and Prof. Gask on duty.
Tues.,	" 5.	—Lord Horder and Sir C. Gordon-Watson on duty.
Fri.,	" 8.	—Dr. Hinds Howell and Mr. Harold Wilson on duty.
Tues.,	" 12.	—Dr. Gow and Mr. Girling Ball on duty.
Fri.,	" 15.	—Dr. Graham and Mr. Vick on duty.
Tues.,	" 19.	—Prof. Fraser and Prof. Gask on duty.
<b>Last day for receiving matter for the October issue of the Journal.</b>		
Fri.,	" 22.	—Lord Horder and Sir C. Gordon-Watson on duty.
Tues.,	" 26.	—Dr. Hinds Howell and Mr. Harold Wilson on duty.
Fri.,	" 29.	—Dr. Gow and Mr. Girling Ball on duty.

### EDITORIAL.

**A**T the conclusion of the present month the Medical College will have passed through what must have been the most important academic year in its long history. The acquisition of the Merchant Taylors' site has opened a new era in the progress of medical education at this Hospital.

The advent of a new year makes one look back on the accomplishments of the past with pride and satisfaction; the magnitude of the funds already raised gives confidence for the future of the scheme. It seems especially appropriate that the year upon which we now embark should be heralded in by the Old Students' Dinner, which is going to be such an outstanding event for all who are present. There are many promised "catches" for the occasion, among whom is the Rt. Hon. Ramsay MacDonald.

We feel sure that those who have already declined the invitation will now want to change their minds, and we advise those who intend to be present to obtain their tickets as soon as possible.

"21st August, 1933.

The Dean writes:

"DEAR MR. EDITOR,—It is just a year ago since the Appeal on behalf of the Medical College was started. We can now congratulate ourselves on the sum of money

already raised, which has enabled us to acquire the site in Charterhouse Square, henceforth to be known as the Medical College of St. Bartholomew's Hospital. My effort in raising these funds has necessitated a holiday in order that I may renew my energies in reducing the debt which we have now incurred.

"We have collected, in money and in promises, about £43,000. We had £7000 available of monies previously held by the Medical College, and we have the value of our building in Giltspur Street—£20,000—which we hope very shortly to be able to sell. Thus we can say we have £70,000 towards the £130,000 required.

"During this coming year, therefore, a very great effort has got to be made to raise the remaining £60,000, and another effort, which is an exceedingly urgent matter for us, to collect a further £25,000, so that we may equip the buildings we have acquired.

"To this end we are laying the foundations of a public appeal which we hope will date from the day of the Old Students' Dinner. This will be a particularly fitting occasion on which to advertise our needs, and moreover, it will be an auspicious one, for we shall have, as our Chairman, the first Bart.'s Peer—Lord Horder—and moreover the Prime Minister of England has signified his intention of being present.

"We hope, therefore, that old Bart.'s men will make a particular effort to support the occasion, so that they can have first-hand information of the scheme to circulate amongst their friends. Bart.'s men themselves have made a very great effort, and they should feel, as we feel, that they are in a position to ask assistance from outside.

"I should like it also to be known that on the afternoon of the 2nd of October, the new site will be open for inspection to any who care to see it, and at 4 o'clock in the afternoon I will be very happy to show old Bart.'s men personally over the site, and explain to them what we propose to do. In order to waste nobody's time it

would be convenient if those who intend to come would send their names to me so that if necessary I can have more than one person present to give this explanation.

"If there are any wishful to have them, there are copies of the Appeal available which will be sent on application.

"There are still many old Bart.'s men who have not subscribed, and some of them have told me personally that they intend to do so. I shall be exceedingly grateful to them if they would let me have their subscriptions before the 1st of October, so that we can make the sum already subscribed by Bart.'s men as large as possible on this occasion.

"I would particularly commend to their attention the letter, which appeared in the last number of the JOURNAL, of my old friend, Eric Young, who has volunteered to give us 125 guineas spread over five years, provided that five others will do the same. This is a really magnificent offer. Surely there must be someone who is prepared to emulate his effort.

"We sincerely hope by the time the next Old Students' Dinner is held the College will be in full running order.

"Yours sincerely,

"W. GIRLING BALL,

"Dean of the Medical College."

#### COLLEGE APPEAL FUND.

	£	s.	d.	
Staff . . . . .	12,134	15	9	(68)
Demonstrators . . . . .	1,504	1	0	(65)
Students . . . . .	472	16	6	(255)
Old Bart.'s men :				†
Bedfordshire . . . . .	5	10	6	(2)
Berkshire . . . . .	86	1	0	(13)
Buckinghamshire . . . . .	72	17	0	(12)
Cambridgeshire . . . . .	154	13	0	(11)
Cheshire . . . . .	1	1	0	(1)
Cornwall . . . . .	22	2	0	(5)
Cumberland . . . . .	5	0	0	(1)
Derbyshire . . . . .	19	14	0	(4)
Devonshire . . . . .	452	1	0	(42)
Dorset . . . . .	16	8	0	(8)
Durham . . . . .	16	6	0	(3)
Essex . . . . .	225	15	6	(15)
Gloucestershire . . . . .	138	1	6	(11)
Hampshire . . . . .	403	11	0	(38)
Herefordshire . . . . .	12	7	0	(3)
Hertfordshire . . . . .	62	10	0	(10)
Huntingdonshire . . . . .				(1)
Isle of Wight . . . . .	135	8	0	(9)
Kent . . . . .	536	18	0	(62)
Lancashire . . . . .	33	7	0	(10)
Leicestershire . . . . .	133	12	0	(6)
Lincolnshire . . . . .	42	3	0	(12)
Middlesex . . . . .	373	15	0	(16)
Norfolk . . . . .	159	7	6	(18)
Northamptonshire . . . . .	54	4	0	(4)
Northumberland . . . . .	101	1	0	(2)
Nottinghamshire . . . . .	13	13	0	(2)
Oxfordshire . . . . .	166	10	0	(14)
Rutland . . . . .				(2)
Shropshire . . . . .	35	9	0	(8)
Somersetshire . . . . .	454	6	0	(23)
Carried forward . . . . .	£18,045	5	3	

	£	s.	d.	
Brought forward . . . . .	18,045	5	3	
Staffordshire . . . . .	194	18	0	(6)
Suffolk . . . . .	262	1	0	(15)
Surrey . . . . .	409	11	0	(39)
Sussex . . . . .	240	0	0	(41)
Warwickshire . . . . .	177	0	6	(17)
Westmorland . . . . .	1	0	0	(1)
Wiltshire . . . . .	92	11	0	(10)
Worcestershire . . . . .	142	8	6	(17)
Yorkshire . . . . .	254	19	6	(19)
Wales . . . . .	32	11	0	(8)
London . . . . .	2,456	6	8	(153)
Channel Islands . . . . .	10	0	0	(1)
Scotland . . . . .	12	2	0	(3)
Abroad . . . . .	38	5	0	(7)
South Africa . . . . .	274	0	6	(16)
Canada . . . . .	113	2	6	(8)
East Africa . . . . .	62	7	0	(6)
West Africa . . . . .	146	10	0	(5)
India . . . . .	137	0	0	(5)
Syria . . . . .	2	2	0	(1)
U.S.A. . . . .	5	0	0	(1)
Ireland . . . . .	14	14	0	(3)
North Africa . . . . .	1	0	0	(1)
North Borneo . . . . .	5	5	0	(1)
Australia . . . . .	12	2	0	(3)
Egypt . . . . .	2	2	0	(1)
Malay States . . . . .	6	0	0	(2)
China . . . . .	40	7	4	(7)
France . . . . .	50	0	0	(1)
Trinidad . . . . .	20	0	0	(1)
British West Indies . . . . .	23	1	0	(3)
Kenya . . . . .	5	0	0	(1)
New Zealand . . . . .	1	1	0	(1)
Services . . . . .	493	14	0	(25)
*Others . . . . .	19,465	13	7	(194)
	£43,249	1	4	

\*These figures include :

	£	s.	d.
University of London . . . . .	5000	0	0
Unilever Bros. . . . .	500	0	0
League of St. Bartholomew's Nurses . . . . .	25	0	0
The Executors of the late Alfred de Rothschild, Esq. . . . .	2000	0	0
Rahere Lodge . . . . .	105	0	0
Corporation of the City . . . . .	1000	0	0
Fishmongers' Company . . . . .	262	10	0
Mercers' Company . . . . .	1000	0	0
Ironmongers' Company . . . . .	100	0	0
St. Bartholomew's Hospital Reports . . . . .	250	0	0
The Haberdashers' Company . . . . .	50	0	0
The Goldsmiths' Company . . . . .	500	0	0
St. Bartholomew's Hospital Women's Guild . . . . .	627	10	9
St. Bartholomew's Hospital Governors . . . . .	584	12	0

† Number of Bart.'s men in County.

#### MEMORIAL TO THE LATE MISS N. POWELL.

This testimonial was to have been given to Miss Powell in April of this year, but her sudden death prevented the presentation being made. The testimonial, which is beautifully illuminated and bound in red niger, has been accepted by the Matron for the Nurses' Library, where it will long serve as a record of the friendship and esteem felt for Miss Powell. The script reads as follows :

"This Testimonial is presented to  
Miss N. POWELL

by some of her friends who have worked with her in St. Bartholomew's Hospital during the years that she was Sister in charge of Luke, Mark and Hope wards. It is accompanied by a small token of esteem to which the undersigned have contributed. It is our desire to place on record

our appreciation of the devoted service that Miss Powell has given, both to St. Bartholomew's Hospital and to all the patients who have been under her care.

"Miss Powell gave invaluable help to her Chiefs by her accurate observation and skilled collaboration in any investigation carried out in the wards under her charge, and those of us who worked with her as house physicians have benefited by her knowledge of nursing and medicine, her wise and kindly instruction and her interest in our personal welfare.

"We wish Miss Powell good health and happiness, and we hope that she may enjoy to the full her years of retirement."

A cheque for £51, the balance of the small fund collected, has been given in memory of Miss Powell to the Capital Account of the Isla Stewart Memorial Fund. The income from the fund is spent, under the direction of the League of St. Bartholomew's Hospital Nurses' for the benefit of some member of the Nursing Staff each year. It was felt that its educational object would have appealed to Miss Powell.

It is hoped that all contributors have received notice of these actions of the Committee responsible for the Fund.

GEOFFREY EVANS,  
*Hon. Treasurer.*

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The following are to be congratulated on their appointments as Lecturers:

*Royal College of Physicians.*—Sir Humphry Rolleston, FitzPatrick Lectures, 1934. Dr. C. H. Andrewes, Oliver-Sharpey Lectures, 1934.

*Royal College of Surgeons.*—Sir Thomas Dunhill, Arris and Gale Lectures, 1934.

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We have to congratulate Mr. H. B. Stallard on being appointed Assistant Surgeon to the Moorfields Eye Hospital.

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We are happy to announce that we have obtained several hitherto unpublished poems by the author of those classics, "The Battle of Furunculus", "B. Subtilis", etc.

All those who know their Bart.'s Bible from cover to cover remember these ditties with ancient relish, and will welcome the new arrivals. We have to thank R. B. P. for his kind permission to publish them, and we hope to print the first of the batch in our October issue.

We would suggest that in the meantime our readers look up the old classics, and that those who are without or who have lost their copy of *Round the Fountain* should send to us immediately for another copy (price 3s. 6d., 7s. 6d.).

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We would like to draw the attention of those readers who are interested in the history of the Hospital Arms to a letter in the correspondence columns from the Rouge Croix. In it many of the questions which have been raised on this subject have been dealt with.

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## OBITUARIES.

### SIR JOSEPH COOKE VERCO.



SIR JOSEPH COOKE VERCO, who died on July 30th, was one of the most distinguished pupils educated at St. Bartholomew's Hospital in the latter half of the last century. Born on August 1st, 1851, at Fullarton, South Australia, he was the third son of Joseph Crabb Verco, who emigrated from Cornwall to Adelaide about 1838. He was educated from 1862-67 at J. L. Young's Academy, then in Stephen's Place, and afterwards at St. Peter's College. He entered the Civil Service as a clerk in the Railway Clearing House Department on leaving school, and came to England in 1870. He passed the Matriculation examination of the London University in June, 1870, and the Preliminary and Scientific examination—then considered the *pons asinorum* for medical students—in the following year. He then entered the Hospital, winning the Entrance examination and subsequently the Wix Prize. He took his M.B. in 1875, the M.D. in 1876 and the F.R.C.S. in 1877. He served as House Physician and Obstetric Assistant at the Hospital with such *éclat* as would have placed him in the running for a medical appointment on the Staff, but he chose instead to return to Adelaide. He sailed from Plymouth as surgeon superintendent of the barque "Clyde" (1140 tons) on January 26th, 1878, in charge of 377 emigrants, and reached Adelaide on April 23rd. He registered at the medical board of South Australia on May 24th, and began immediately to practise as a general practitioner in Victoria Square, advertising his arrival by means of a red lamp and an unusually large name-plate on which were displayed his various degrees. He is described at this time as being 5ft. 7½ in. in height, with a long, flowing beard reaching half-way down his waistcoat, deliberate in manner, speech and gait.

He was soon appointed Honorary Physician to the Adelaide Hospital and Honorary Physician to the newly founded Adelaide Childrens' Hospital; the latter post he resigned in 1890. From 1885-1919 he was Chief Medical Officer to the South Australian branch of the Australian Mutual Provident Society.

The University of Adelaide was founded in 1885, and two years later Verco was appointed Lecturer on Medicine jointly with Dr. Davies Thomas, acting as sole Lecturer from 1888-1915. He was also Dean of the Faculty of Medicine in 1889 and again in 1920, and was largely responsible for carrying out the details connected with the foundation of the Dental School and Hospital. In 1887 he was chosen President of the

first Inter-Colonial Medical Congress of Australia, and in this year he had a severe attack of typhoid fever. He gave up general practice on his recovery, and confining himself to medicine, was perhaps the first purely consultant physician in the colony, when he declined to attend cases of midwifery in 1891.

At the Adelaide Hospital he was Honorary Medical Officer in 1880; Honorary Physician 1882-1912 (with the peculiar privilege of operating upon patients with hydatids), and Consulting Physician from 1912. He resumed active work on the staff of the hospital when a shortage occurred during the years of the war.

A man of many interests, Verco was well known as a conchologist, and was President of the Royal Society of South Australia from 1903-1921. He was twice President of the South Australian Branch of the British Medical Association, and was its representative at the Portsmouth meeting in 1923. He received the honour of Knighthood in 1919, and was present as a delegate from South Australia on the occasion of the Octocentenary of the Foundation of this Hospital in 1923. He married on April 11th, 1911, Mary Isabella, daughter of Samuel Mills, of Adelaide, but there were no children by the marriage.

Verco was a skilled stenographer and a good teacher. His lectures were delivered so slowly that students could take them down *verbatim* and thus dispense with a text-book. He came of a sturdy and uncompromising Nonconformist stock, and in his earlier years excited some amount of ill-feeling, which was perhaps partly intensified by a jealousy of his higher professional attainments.

D'A. P.

#### WILLIAM JOHN GOW, M.D., F.R.C.P.

The death of Dr. W. J. Gow was recorded in the July issue of the JOURNAL. It took place quite suddenly, on June 19th, when, after riding up a steep ascent on to Exmoor and while still seated on his horse, he was admiring the wide expanse of landscape spread out before him. Old Bart's men, especially those whose student days date from "the 'eighties" of the last century, will at once recall to memory the striking figure, so familiar to all associated with the Hospital half a century ago. Willy Gow was born in 1863, son of the Rev. John Gow; he was educated at Owen's College, and qualified from Bart's as M.R.C.S. in 1885, M.B. in 1886 and M.D.(London) in 1887. From his earliest days at the Hospital he was a marked man; for no student attending lectures there could help seeing the listener with the light hair, who rarely failed to occupy the seat

in the front row of the amphitheatre on the extreme left; indeed, the first thoughts of those seating themselves in the higher rows of seats was, from sheer habit, to verify that the familiar figure was *there*, bending over a notebook, the while notes taken of the preceding lecture were being carefully studied in order that the reader might find himself *en rapport* with the theme of the lecture then about to commence. Careful observers soon, however, learnt that the said reader was remarkable for physical strength and for aptitude in playing games, as well as for indefatigable industry and mental alertness; in fact, he became the observed of all observers in that St. Bartholomew's of long ago. As an instance of the impression made by his unique personality, some few years ago when Willy Gow was on the Junior Staff he organized a visit to a theatre in East London to see a world-famous actor who was appearing there. Gow had booked the stage box, and on his entry with his retinue there was applause such as might have greeted a well-known public character; the occupants of the gallery were later much gratified when the actor (whom all had come to see), who was taking the part of a knight on horseback, with his lance in rest, spontaneously paid tribute to the striking personality among the audience by riding across the stage and shaking hands with Willy Gow in the stage box. It was doubtless this remarkable capacity for exciting interest, combined with an unquestionable mastery of all branches of his work, which led us all to seek Gow's advice on knotty questions. "When in doubt, ask Gow" was recommended as a rule of conduct to many a Bart's student. Those who had clerked in Dr. Gow's wards when Gow was House Physician there, or in Dr. Matthews Duncan's ward when Gow was in charge of "Martha", and those who profited by Gow's demonstrations when he was assistant to Dr. V. D. Harris in the Physiological Laboratory, could not fail on settling down in practice to recollect the once familiar rule of conduct, and to this fact Gow's rapid success in consulting practice was doubtless largely due.

On the Junior Staff at Bart's Gow was contemporary with H. D. Rolleston, W. H. R. Rivers, F. W. Andrewes, G. L. Turnbull, H. J. Tilden and others, for, as already noted, he filled more than one post. He later held appointments on the hospital staffs of the Metropolitan, Queen Charlotte's and the Royal Waterloo Hospitals. In 1892 he was elected on the Secretary's Staff, and an appreciative account of his great work as Obstetric Surgeon there, and in his private consulting practice, appeared, on his retirement in 1913, in the *St. Mary's Hospital Gazette*. Note is made of "the sound judgment and extraordinary manipulative dexterity displayed by him in the management of an



obstetric emergency", and of the fact that he performed the operation of Cæsarian section "more than fifty times with a mortality of one". The writer of this "In Memoriam", moreover, observes that "at Queen Charlotte's Hospital it was recognized among the residents of his day that quiet talks with Gow were experiences to be looked forward to and never to be forgotten".

So hard had Gow worked, and so rapidly had his consulting practice grown, that he was able to contemplate retirement when only fifty years of age. Then came the War; he volunteered for service, and was aboard a transport which was torpedoed in the Mediterranean, with result that he was a considerable time in the water before he was picked up; this experience, coming as it did after such strenuous years of work, prompted his complete retirement; he travelled, however, and continued to the end of his life to be greatly interested in horsemanship.

Dr. Gow's eminently successful, though all too short, work as an obstetric surgeon aroused feelings of the deepest gratitude on the part of a multitude of patients and their relations and friends. In thinking of his remarkable career, one recalls to mind the words of the latter-day philosopher, who wrote—"The abiding essence of a great mind and noble personality posthumously acts, if with a weaker, yet with a purer power than could be permanently exercised by himself . . . for his influence as for himself death cuts the tie between the mortal and immortal". W. H. H.

## THE PSYCHOLOGY OF AUTHORSHIP.

*Being the Annual Oration delivered before the Osler Club on July 12th, 1933, by W. Langdon Brown, M.D.,*

*F.R.C.P., Regius Professor of Physic in the University of Cambridge.*

**M**AY I, in the first place, say how highly I appreciate the compliment of being invited to deliver the Osler Oration? It was a happy thought on your part to adopt the name of Osler for your Club, for he, of all men, had his eye directed towards the younger generation. Predecessors in the honourable duty I have to perform to-night have doubtless told you much of him. I did not know Osler really well, but no one who came within his magnetic field is likely to forget the electric force and charm of his personality. To me one of his outstanding services to British medicine was the foundation of the Association of Physicians, which has done so much to break down those barriers

within which physicians were all too prone to work in an isolation which was not always splendid. The Association changed all that, and the friendly atmosphere, the free give and take which his spirit infused into its meetings has done much to humanize medicine in the British Isles.

Out of the Association sprang the *Quarterly Journal of Medicine*, and if you look into its pages you will find a fairly accurate reflection of the growth of English medicine in the last quarter of a century. And though he has passed away, the Association and the *Journal* carry on his good work—no slight memorial.

I am told that this Oration may be on any subject in which Osler would have been interested—a wide field indeed, for he was interested in everything. Undoubtedly the topic of "The Psychology of Authorship" comes within the four corners of the definition, for he was passionately interested in books. A mutual friend related to me a characteristic anecdote. They were talking of some book, when Osler rose from his chair, and unlocking a little cupboard by the fireside, drew out the book in question. "I keep these particular books locked up," he said; "I'm so afraid I should steal them myself."

In beginning with some aspects of authorship in the seventeenth century, I am actuated by two motives. The first is a personal one. When I was introduced to Osler he made a friendly allusion to me as the son of my father. For we both sprang from the same Puritan stock, and from his youth his mother had instilled in him an interest in John Bunyan, to whom my father was the sixth direct successor, and of whom he wrote the standard biography. The second is a more topical one: at the present moment there is a great revival of interest in seventeenth century literature. And there is good reason for this, for that age and the present have this in common: they are both ages of disillusionment.

No one, I fancy, would challenge the statement that this is an age of disillusionment. The enormous material advance of the nineteenth century begat an invincible belief in the Law of Progress, and in its latter half Manchester Liberalism and the doctrine of "*laissez-faire*" drew fresh sustenance from Darwinism after a preliminary revolt from such unaccustomed food. The struggle for existence and the survival of the fittest seemed to provide scientific sanction for its business methods. And then the skies changed; a preliminary rumble of thunder came from the Boer War, and then the storm was upon us. Ruefully regarding the wreckage left by the passage of that tornado, doubtfully gazing around for fresh clouds which may burst upon our devoted heads, we realize indeed the shrewd winds of disillusionment.

In another way, and for somewhat different reasons, the seventeenth century was also an age of disillusionment, which began before the Civil War. It therefore interests us to see how our ancestors comported themselves when they awakened from the heady dreams of the Elizabethan age. Man's impulse to classify perhaps tends to make him lay undue emphasis on the cleavage between one century and another, for our calendar is purely artificial in that respect. Yet who can doubt that with each of the two queens, Elizabeth and Victoria, an epoch also died?

On its intellectual and artistic side what a marvellous flowering was the Renaissance! We may attribute much to the new writings, that is to say, printing, the new learning which was the old learning come to life again, and the new world across the Atlantic. All of these seemed to stimulate man's imagination in a way that had not happened since the Greeks rebuilt Athens after defeating the Persians. Yet its inner essence remains as mysterious as the springing of youth into adolescence. Of the Renaissance the late Sir Walter Raleigh, whose name and spirit alike are reminiscent of that time, wrote thus:

"That great movement of the mind of man brought with it the exhilaration of an untried freedom and the zest of an unlimited experiment; but it took the human soul from its station in a balanced and rounded scheme of things, to deliver it over to every kind of danger and excess. . . . From his servant's estate in the great polity [of Catholic theology], man was released by the Renaissance, and became his own master in chaos, free to design and build and inhabit for himself. The enormous nature of the task, which after three centuries is still hardly begun, did not at first oppress him; he was like a child out of school, trying his strength and resource in all kinds of fantastic and extravagant attempts."

If danger and excess, fantastic and extravagant attempts are to be put on the debit side, we may fairly put it on the credit side of the Renaissance that free inquiry was no longer stifled. It is an intriguing thought that if the attitude of the Middle Ages to scientific research still held, Lord Rutherford, Sir J. J. Thomson and Marconi would certainly be languishing in prison, if indeed they had not already been burnt at the stake.

Gerald Heard, in his thought-provoking book, *The Ascent of Humanity*, expresses his point of view somewhat as follows: The Renaissance stated its problem and gave its solution, that man is an individual, and that he is free to take his satisfaction from Nature and the community. Up to the close of the sixteenth century the most active spirits had not got beyond that simplicity. This, under the thin disguise of a formal assent to religious *clichés* was still Bacon's attitude.

Machiavelli's *The Prince* is fundamentally the product of a simple mind. It is not subtle; it is only cynical; the eternal commonplaces of virtue are merely reversed. If "Thou shalt love thy neighbour as thyself" does not make for success, then the opposite obviously must. But inevitably the Prince of Machiavelli is succeeded by Hamlet, Prince of Denmark. Bacon remains no more than the last great fruit of the Renaissance; the highest development to which the speculative mind could attain is unaccompanied by a proportionate sensibility. He fulfilled the middle rôle between Machiavelli and Shakespeare. The theme that individuality, however intellectually endowed, is not enough, the recognition of a rudiment of feeling breaking through the surface of the self-contained mind is the fundamental obsession of Shakespeare. He cannot escape from the fatal irresolution which he discovers developing in his own consciousness and among his contemporaries. The age had been one of almost frantic activity. The country of which he was a native had had every stimulant; wild adventure in the ends of the earth, threats of destruction from abroad, constant plots within. Now it was beginning to sober down.

Whether Shakespeare was a syndicate or an individual, whether he was Edward de Vere, 17th Earl of Oxford, or not, in my opinion he certainly was not Bacon. And my principal reason for being so dogmatic is the kind of evidence I have adduced from Gerald Heard. Intellectually, at any rate, they were not really contemporaries. A gulf yawns between them; a new sensibility has been born, even though Shakespeare records and comments, but does not judge.

In the drawing-room of the Master's Lodge at Trinity College, Cambridge, hangs a portrait of Bacon sufficiently sinister to make the onlooker uncomfortable. Yet I am informed that it is less sinister than the original one in the possession of his family, which, when copied, has actually been altered, so evil is its expression. An interesting sidelight on his character!

The greatest proof of Shakespeare's genius to me is that each century has found something new in him. Regarded by certain of his contemporaries with something "this side idolatry", to the seventeenth century he was fancy's child, warbling his native wood notes wild, and to the eighteenth century a master of rhetoric. Then the early nineteenth century found something unsuspected before or since, for Coleridge took him as a final and complete exponent of morals. He even went so far as to say that any characteristic not described by Shakespeare was not an important ingredient of human nature. Unfortunately for his thesis, he illustrated it by saying Shakespeare never described avarice, which was therefore not a fundamental human characteristic. True.

Shylock was actuated more by revenge than by avarice, but Coleridge's idea seems to have been to make Shakespeare a Bible of human conduct. A curious conception of a man who had to write plays that would literally beat cockfighting if he was to attract audiences to his Bankside theatre from the neighbouring sports! The Victorian age commended Shakespeare for his intelligent anticipation of the Victorian young lady, while ours finds in him an exponent of those psychological problems by which we are obsessed.

Then there is Pearsall Smith's view: "Once and once only in the history of a people, there comes a divine moment when its speech seems to those who write it a new-found wonder; when its words are fresh with the dew of the morning upon them, when its language is in a plastic state, unстереотyped, unhackneyed, unexploited; and it is at this moment that the one supreme poet appears; for no form of language seems rich enough to provide material for more than one single poet of this rank."

"Such a supreme poet Shakespeare became; in the great linguistic ferment of the 1590's he made himself the great lord of language, the most articulate of human beings".

Not that this expresses all of Shakespeare's magic. Like Lyly, he started as a euphuist, but he became much more. There is, by the way, the same sense of joyous discovery of a new language in the writings of Joseph Conrad, to whom also English was foreign and fresh.

Since writing this I have come across a cutting I made from the *Times Literary Supplement* some two years ago. It serves to illustrate the point I have been trying to make:

"Now there seem to be, or to have been, two principal conditions under which poetry in the grand style has been written in the Christian era—conditions represented by Dante and Shakespeare respectively. One is the universal prevalence of a systematized religious faith offering symbols which express the mystery of human life, so that poetry can, without any sense of derogation or limitation, make itself ancillary to religion and 'justify the ways of God to man'. The other is the occurrence of a moment, naturally associated with the decline of a universal religious faith, when the individualistic view of life prevails, and the mystery of life finds expression in tragedy. These moments are not simply opposed to one other. They are phases in a historical movement. While Christianity was, consciously or unconsciously, the universal faith, tragedy was impossible; since Christianity, obviously, does not permit the tragic view of life. As Christianity weakens, tragedy emerges. But manifestly the tragic view of life has no finality. As an individual and prophetic man, Shakespeare passed beyond tragedy. It would be a mistake to urge, as is sometimes urged, that he returned to Christianity; he rather passed from Christianity, through tragedy, to a reconciliation of a kind which, no doubt, was found in former days by chosen spirits in Christianity, but is not uniquely Christian. Of all this movement in Shakespeare, Goethe, the first profound student of Shakespeare, was perfectly conscious."

But I am not embarking on the sea of Shakespearean criticism, which is bestrewn with so many wrecks. I am content to rejoice that the magic of his language increases

for me with every year I live. Where he comes into my story to-day is that his later work marks the definite change of thought which happened because the Renaissance and the Reformation "had quickly fallen out of step". Things were proving not so simple after all. The counter-Reformation, too, was complicating things. Men began to cast up their losses and their gains. Hobbes, that forerunner of the materialistic rationalists, remarked in his *Leviathan* that since the Renaissance led to so much effusion of blood, "I think I may truly say that never was anything so dearly bought as these Western poets bought the learning of the Greek and Latin tongues". The political horizon was clouding too. All this is reflected in what Grierson has called the "cross currents in English literature of the seventeenth century", and of which he has written so illuminatingly.

The change is well illustrated by the difference between the earlier and the later writings of Donne, though the change from the extroversion of the sixteenth to the introversion of the seventeenth century is implicit in both. But my acquaintance with the Anglican writers, such as Donne and Sir Thomas Browne, is of the slightest. I prefer to illustrate my thesis from such Puritan writers as Milton and Bunyan, of whom I know something more. Milton's case was complex, Bunyan's simple. I will take the simpler first.

John Bunyan's upbringing was of the humblest. There is a note in the diary kept by the Rector of the neighbouring parish about his father: "One Bonion of Elsto clyminge of Rookes neasts in the Bery wood ffound 3 Rookes in a nest, all white as milke and not a black fether on them." "And as we watch him, the surprise on his face becomes symbol and presage of a wider world's wonder than his, the wonder with which men find in the rude nest of his own tinker's cottage, a child of genius." Indeed a white bird in the black rook's nest.

He lived sixty years and wrote sixty books. His prose was poetry and his poetry was prosy. His imaginative power was great, and Puritanism allowed of few outlets for it, except that of the religious allegory. It may be that the continued popularity of the *Pilgrim's Progress* is partly due to the fact that it was one of the few books which, in the stricter days of nonconformity, children were allowed to read on Sunday. Myself, I have pored with delight over illustrated editions portraying Christian in deadly conflict with that laidly beast Apollyon, and followed the siege of Mansoul in "The Holy War" with quite another interest from that intended by the author. And then there was *Foxe's Book of Martyrs*, an early edition which had belonged to Bunyan himself—with illustrations of horrible tortures and burnings such as charm the sadistic strain



to be found in most children. Yes, these were compensations which even that hymn, "A few more years shall roll", with its appalling threat of an "Eternal Sabbath Day", could not quite obliterate. Augustine Birrell tells us how, in his early days, the title of "The Bible in Spain" allowed him to mitigate the Sabbath by revelling in George Borrow. However, there is no doubt that the *Pilgrim's Progress* is a fine allegory written in fine English.

But if we are to know Bunyan himself, we shall find the key in his *Grace Abounding to the Chief of Sinners*. The psycho-neurotic note is struck at once. "The Chief of Sinners"—for the psychoneurotic must be the chief of *something*.

Bunyan was a sick soul in those earlier years. Literature owes much to the sick soul. If you want a skilful dissection of different types of the sick soul read William James's *Varieties of Religious Experience*. To the normal man such shuddering depths of despair and fear seem unreal, but they are real enough to the sufferer. Bunyan was obsessed with a sense of sin. When the history of thought in the nineteenth and twentieth centuries comes to be written, it will surely strike the writer that about seventy years ago the idea of sin began gradually to lose its hold over man's minds, and that to-day it has almost vanished for the great majority. And I should be surprised if that writer does not point out that this change is almost synchronous with the increasing hold of the idea of evolution. But obsessional states and anxiety neuroses continue among religious and irreligious alike. Religion does not cause them, nor, according to the histories religious patients give me, does it cure them. Rather does the failure of religion to help them add to their torture, since they feel this must be due to some failure of faith on their own part. The falling and the lifting of the cloud seem equally mysterious in the present state of our knowledge.

Bunyan's anxiety neurosis shows the characteristic spread of a phobia. He tells us that he was fond of bell-ringing. Then he came to regard this as a sin. But he would still go and lean against the old doorway and look longingly while a neighbour pulled the bell rope. Then he was afraid even to do this. How if the bells should fall? How if even the steeple itself should come down? About that very time a flash of lightning struck one of the village churches of Bedfordshire, and "passing through the porch into the belfry, tripped up his heels that was tolling the bell, and struck him stark dead". What if this should happen to him? And so the phobia spread and spread.

Strange alternations of gloom and glory came over him. Sometimes he was visited by such visions of light and hope that he could have told his joy to the

very crows of the field. He thought then that he should never forget that joy even in forty years' time. But alas! in less than forty days the vision was all faded and gone: "Oh how happy now was every creature over I was! for they stood and kept fast their station, but I was gone and lost." Then at last comes relief in his conversion. I hope you will not think me flippant if I suggest that this was a "conversion" in the Freudian sense of the term, for what really happened, as Grierson points out, was that "Bunyan's fear of the wrath to come made him afraid of nothing else". I believe that is correct; the fear of the unknown was less bearable than the fear of something which he thought he knew, and from which he felt he had the means of escape.

In allegory, too, one is tempted to think he found an escape. "He enjoyed writing and creating scenes and characters, drawing on his knowledge of the human heart and the human character, and also a little on those 'bestly romances' which he had read in his youth. It is a partial emancipation. The main issue is never lost sight of. . . . Fear is the dominant emotion." It is an interesting fact that when he married a wife as poor as himself she brought with her two books, one of which was entitled *The Plain Man's Pathway to Heaven*. Herein he may well have found the germ of *The Pilgrim's Progress from the City of Destruction to the Celestial City*.\*

Schirmer has emphasized the interesting fact that the Puritans, despite their condemnation of the drama and general disapproval of all secular literature that had only pastime for its end, were vital contributors by way of allegory to the rise of the novel, as a realistic picture of everyday life and character, and also as a vivid portrayal of the inner conflict of conscience and passion. I may remind you that Defoe was a dissenter, and therefore had stoutly to maintain that his romances were narratives of fact.

"But if the *Pilgrim's Progress* was a forerunner of the novel, *Grace Abounding* was the ancestor of Rousseau's *Confessions*, and James Joyce's *Portrait of the Artist as a Young Man*" says Schirmer. Strange adventures that link John Bunyan with James Joyce. But how different were their spiritual Odysseys!

The case of Milton was a more complex one as I have said, and one that is more illustrative of cross-currents.

I count it a gain that at school I was made to learn "L'Allegro," "Il Penseroso," "Lycidas" and the "Hymn on the Nativity" by heart. They are a storehouse of

\* In the discussion which followed the Oration, it was pointed out that a Cluniac MS. of the thirteenth century, *Le Voyage d'une Ame*, contains too many of the incidents of *The Pilgrim's Progress* to be merely coincidence. As this MS has only been recently translated into English it is impossible for Bunyan to have read it. He may, however, have heard its story at third or fourth hand.



lovely imagery and have become for me an abiding possession. But I see now, as I did not then, that they also illuminate both the passionate and the Puritan sides of his nature, which waged perpetual warfare in him. His parents early made up their minds that he was destined for greatness. That, I believe, is not uncommon in parents! The result was, as Mark Pattison emphasized, that his early life was a long preparation for some great task which he felt was laid upon him, the exact nature of which it was not given to him at once to descry, though his natural aptitudes and inborn tastes pointed to a literary work, a great poem which should be an act of service to God and to his country. But his sheltered upbringing left him to some extent without armour for the contacts of a rough world. And Milton had to live through troublous times, within and without. The way of idealists is hard, especially if they be also poets and egoists, and "the Milton who composed *Paradise Lost* was an angry and embittered man", says Grierson. "Much for this man, young, passionate, pure, would depend on the woman with whom he first fell seriously in love, and whom he should make his wife. That experience came to Milton simultaneously with the challenge that summoned him to leave the enchanted garden of culture and meditation, to take up his rôle in the world of action." The meeting of the Long Parliament in 1640 was for him the great awakening. "To the young man of 33 it seemed that a new age was beginning for the English people and the Christian church. . . . And then in the early summer of 1643 he made his sudden journey into the country, 'nobody about him certainly knowing the reason, or that it was more than a journey of recreation,' and returned with Mary Powell as his wife. Of what led up to that marriage we know nothing and can only assume . . . that the susceptibility to passion of which his Latin poems give evidence, which his high ideals of purity and love, his religious temper and training, had kept in check took revenge upon him and made him too hastily discover the 'well-beloved' in a young girl of 17. The consequences were for him almost as disastrous as the very different marriage of Byron was for a very different poet. This first and fatal shock to a finely tempered and carefully nurtured and sheltered personality . . . coloured everything that he thought and wrote to the end of his life." You are to remember his point of view. His praise of chastity in "Comus" is so extreme as to seem to us to-day deliberately designed to defeat its own purpose, and was indeed recently so represented on the stage. But it was real to him. Here indeed was a crux. He was not disposed to accept the situation as irreparable. "If his marriage had gone wrong, the laws of marriage must be reconsidered," and that early

summer had only deepened into August before he had published his *Doctrine and Discipline of Divorce*. "But among the most censorious critics of the doctrine of divorce are the Presbyterians, and they are the censors of the press. So Milton parts from his old friends." He writes his *Areopagitica*, a demand for the freedom of the press, pours contempt upon his opponents, and declares that new Presbyter is but old Priest writ large. His second marriage brought some promise of assuagement, but "his late espoused saint" died all too soon, as we know from one of his most beautiful sonnets.

We see that for Milton to feel a thing strongly, it had to be part of his personal experience. This is seen even in *Paradise Lost*. The Homeric conflicts between God and Satan reflect the turmoil of his own soul. The idyllic scenes in the Garden of Eden represent the conquest of reason by romantic love, of which he had had bitter experience. But after that, when he is trying "to justify the ways of God to man" he becomes more didactic and far less interesting. I doubt if any of us remember much beyond the first four books. Seen in this light we can understand why Satan is made such an heroic figure—he represents Milton's own instinctive emotional self, struggling in the toils of social convention which bound him. Blake says that "Milton was of the Devil's party without knowing it", though Blake's own illustrations to Job show more than a sneaking admiration for Satan. Landor is probably nearer the mark when he says that *Paradise Lost* is "not a justification of the ways of God to man as orthodoxy understands it, but an arraignment of orthodox conceptions of God and the Devil, a complete reversal of the apparent values of the poem". Grierson sums up the situation when he says: "In Milton the creature imagination and the critical intellect did not work in such harmony with one another as they have in some other poets".

But that indeed is the crux for many writers, both of poetry and prose. Let me illustrate two different methods of resolving this conflict, both of which I regard as pathological.

Just after my first visit to Rome, some thirty years ago, I read a remarkable novel, *Hadrian the VIIth*, by Rolfe. In it an Englishman achieves the triple tiara and takes the title of Hadrian, because it is the same as that taken by Nicholas Breakspear, the only Englishman who ever became Pope. He renounces all claim to temporal power, aiming at solely a moral sovereignty over Europe. The people applaud, the Cardinals are scandalized, and Hadrian is killed by an assassin's bullet. As I read the story I became more and more convinced that the author had visualized himself as Pope. A few years ago I read an account of him which

more than justified that idea. He took the title of Baron Corbo—where gained no one knows. He wrote several books, but this was the only one which attracted much attention, and he became more and more overbearing, quarrelsome and impossible in every relationship of life. Those who knew him realized that he was always seeing himself as Pope, and as he was not treated as Pope, he was fiercely resentful. He would begin a letter, "Quite cretinous creature", and end another, "bitterest execrations". It has been said that "to the world at large he seemed actuated by motiveless malice. . . . He saw the hand of an enemy in every misfortune; and where he saw an enemy he struck". The fantastic image of himself that he constructed overflowed into real life; the conflict became an external instead of an internal one. His condition was perilously near a psychosis, if it did not actually become one.

The second illustration is that of the author of *John Inglesant*. When I was entering my teens it happened that I came into a literary atmosphere which I enjoyed without comprehending it. The people in it talked much of John Henry Shorthouse and his book *John Inglesant*. When I was thirteen his much-heralded second novel appeared—*The Little Schoolmaster Mark*. It was a complete and dismal failure. He proved to be emphatically a man of one book, but that book continued to have readers and admirers more than half a century after its first appearance, when the author was regarded as a "minor prophet of things of mystical taste".

Then in 1925 came a bombshell into literary circles when W. K. Fleming published an article in the *Quarterly Review* entitled "Some Truths about John Inglesant". He had discovered that this much-admired book was a regular mosaic of borrowed gems. His enlightenment came from reading in the *Diary of Thomas Ellwood* these words: "I was sitting all alone. . . . I felt a word sweetly arise in me, as if I heard a voice which said, Go and Prevail. And Faith springing in my heart with the word, I immediately rose and went, nothing doubting". The phrases had a familiar ring, and then Fleming remembered that these were the words in *John Inglesant* used by Mr. Thorne in paying his addresses to Mary Collet of Little Gidding. Further search reaped a rich reward. The "liftings" were sometimes paragraphs, sometimes whole pages from many works. The extraordinary thing is that many extracts had been taken from books that are still read, and not merely from recondite sources. I might instance Evelyn's *Diary*, Hobbes's *Leviathan*, John Aubrey, Anthony à Wood, Burton's *Anatomy of Melancholy*. There were many others. Yet the book had been published forty-four years before this was detected.

It suggests that we are not so well versed in seventeenth century classics as we sometimes pretend to be.

Fleming's comment is that Shorthouse apparently drenched himself in literature contemporary to his tale of the seventeenth century, which he threaded together with his own really beautiful nineteenth century English. "Shorthouse," he says, "probably looked on the book as a private labour of love, never destined to see the light; when persuaded by friends less versed than himself in the originals he found it impossible to tear out the borrowings without fatally disfiguring the whole." But this is hardly a complete explanation. Let us turn to the preface he wrote to the second edition and his defence of what he calls the philosophical romance, in the course of which he says, "Yes, it is only a Romance. It is only the ivory gates falling back at the fairy touch. It is only the leaden sky breaking for a moment above the bowed and weary head, revealing the fathomless Infinite through the gloom. It is only a Romance". Beautiful words, but not precisely informed with the humility of a conscious plagiarist.

Mr. Spens, the Master of my College, tells me that with full knowledge of these borrowings, he cannot believe that the mystery of *John Inglesant* is yet solved. He maintains that there is still much of Shorthouse in it. In particular he instances Inglesant's statement of the Catholic position in the Epilogue, which is only thus stated in one other work—and that a Russian book which has only recently been translated into English.

Soon after Fleming's revelations appeared I happened to come across A. C. Benson's description of Shorthouse in *The Silent Isle*. It is important to remember that Benson died before these revelations were made:

"I have been reading the *Memoir of J. H. Shorthouse*, and it has been a great mystery to me. It is an essentially commonplace kind of life that is there revealed. He was a well-to-do manufacturer of vitriol, too, of all incongruous things. He belonged to a cultivated suburban circle, that soil where the dullest literary flowers grow and flourish. He lived in a villa with small grounds; he went off to his business in the morning, and returned in the afternoon to a high tea. In the evening he wrote and read aloud. The only thing that made him different from other men was that he had the fear of epileptic attacks for ever hanging over him; and further, he was unfitted for society owing to a very painful and violent stammer. I saw him twice in my life; remote impressions of people seen for a single evening are often highly inaccurate, but I will give them for what they are worth. On the first occasion I saw a small, sturdily-built man, with a big clerical sort of face with marked features, and as far as I can recollect,

rather coppery in hue. There was a certain grotesqueness communicated to the face by large, thin, flyaway whiskers of the kind that used to be known as 'weepers' or 'Dundrearies'. He had just then dawned upon the world as a celebrity. I had myself read and re-read and revelled in *John Inglesant*, and I was intensely curious to see him and worship him. But he was not a very worshipful man. He gave the impression of great courtesy and simplicity; but his stammer was an obstacle to any sense of ease in his presence. I seem to recollect that instead of being brought up, as most stammerers are, by a consonant, it took the form with Shorthouse of repeating the word 'Too-too' over and over again until the barrier was surmounted; and in order to help himself out he pulled at his whiskers alternately, with a motion as though he were milking a cow. Some years after I saw him again; he was then paler and more worn of aspect. He had discarded his whiskers, and had grown a pointed beard. He was a distinguished-looking man now, whereas formerly he had only been an impressive-looking one. I do not remember that his stammer was nearly so apparent, and he had far more assurance and dignity. I was still conscious of his great kindness and courtesy, a courtesy distributed with perfect impartiality.

"But the mystery about him is this. The *Life* reveals or seems to reveal a very commonplace man—religious, essentially parochial. His letters are heavy, uninteresting, banal and reveal little except a very shaky taste in literature. The Essays, which are reproduced, which he wrote for Birmingham literary societies, are of the same quality, serious, ordinary, prosaic, mildly ethical.

"Yet behind all this, this pious, conscientious man of business contrived to develop a style of quite extraordinary fineness, lucid, beauty-haunted, delicate and profound."

Now does a distiller of vitriol become a distinguished man by fraud and robbery? I find the clue in the fact that Shorthouse was an epileptic. We know by clinical experience that epileptics may suffer from an extraordinary division of personality. Shorthouse making sulphuric acid in Birmingham and taking high tea was one man. Shorthouse in his study utterly immersed in the seventeenth century was quite another, and one Shorthouse did not know what the other Shorthouse did. The real life and the dream life were separate things, and the initial sentences of his preface indicate a mild surprise at finding a white bird in this nest in the Black Country. Insofar as the dream life overflowed into the real life it made a bigger man of him—the complete opposite of Baron Corvo's fate.

But this is the seventeenth century at second hand, and I will merely draw this part of my subject to a close

by quoting from a recent article by John Hayward, my predecessor's nephew, which I think puts forcibly and well the decline that accompanied the end of that century.

"The vein of true poetic gold follows a strange uneven course through English poetry, but never more crookedly and unaccountably than in the seventeenth century.

"An age not 60 years separates Sir Henry Wotton from Tom Southerne. Sophistication increases as the century draws to its close, though it cannot disguise in a changing world, an all too apparent restlessness of thought and sensibility. . . .

"The heaven of Traherne and Herbert, the mystical paradise of Vaughan and Crashaw had passed away; Herrick's flowers had withered; in the songs of Dryden and his contemporaries are only echoes of an earlier music; while the metaphysical brilliance of Donne and Marvell had become dissipated in the absurdities of Cleveland and in Cowley's egregious imitations."

Dryden is not in much favour at the present moment. Prof. Housman rated him soundly in his recent Leslie Stephen Lecture at Cambridge. Speaking of Dryden's attempts to modernize Chaucer he said, "That there should ever have existed an obtuseness which could mistake this impure verbiage for a correct and splendid diction is a dreadful thought. More dreadful is the experience of seeing it poured profusely, continually and with evident exultation from the pen of a great and deservedly illustrious author. But most dreadful of all is the reflexion that he was himself its principal origin".

He goes on to say: "Meaning is of the intellect, poetry is not. If it were, the eighteenth century would have been able to write it better. As matters actually stand, who are the English poets of that age in whom one can hear and recognize the true poetic accent emerging clearly from the contemporary dialect? These four: Collins, Christopher Smart, Cowper and Blake. And what other characteristics had these four in common? They were mad." He claims that he recognizes the veritable poetic note by its physical effects upon him, in the following amusing way: "Experience has taught me, when I am shaving of a morning, to keep watch over my thoughts, because, if a line of poetry strays into my memory, my skin bristles so that the razor ceases to act. This particular symptom is accompanied by a shiver down the spine", and so on. "The seat of this sensation," he concludes, "is the pit of the stomach." Here he joins hands with Van Helmont across the centuries we have traversed this evening, who located the "sensitive soul" there. It is interesting to find poetry defined in terms of its effect upon the autonomic nervous system, and it again brings us up sharply



against authorship as a conflict between the intellect and the emotions.

Renaissance, Reformation, Rationalism, Romantic Revival, the R's roll on their way, each wave bearing witness to some phase in this eternal conflict. That it is present to-day, smaller wavelets are constantly reminding us. If I select a modern instance, I fear I may not carry you with me as much as I would fain hope I have done so far. For to mention the name of D. H. Lawrence is to see wigs scattered afar upon the green.

Harold Nicolson appears to regard him as the prophet of a new revelation, and thinks that his influence upon the younger next generation will in the next few years be overpowering. I rather doubt this. My view is that Lawrence had great literary gifts, which were fatally crippled by his psycho-neurosis. And I think that a generation with minds undamaged by the war and the scarcely less disastrous peace which has followed will recognize that fact.

It is generally recognized that D. H. Lawrence was in the grip of mother fixation all his life. So much is clear from his intensely autobiographical novel *Sons and Lovers*, which in my opinion is the only book of his which will prove of permanent value. His mother, disappointed in her husband, turns to her son. In a later book, *Fantasia of the Unconscious*, he had realized the situation and judged it severely. He says: "So she throws herself into a great love for her son, a final and fatal devotion, that which would have been the richness and strength of her husband and is poison to her boy. . . . Parents are the first in the field of the child's further consciousness. They are criminal trespassers in that field. . . . They establish [a] circuit. And break it if you can. Very often not even death can break it". He clearly recognized, as Middleton Murry said, that the father failed the mother because he would not assume purposive responsibility; the mother failed the father because she was cold and untender to him; and the children were devastated by the diverted and perverted love.

Naturally he failed in his adult relationship with women. Such men always do. He said: "You will not easily get a man to believe that his carnal love for the woman he has made his wife is as high a love as that he has felt for his mother". The word "carnal" betrays him; it is all that the mother-fixed can give, but they ask a great deal more. He met with great sympathy and help—he recognized that, but could not avail himself of it. Note this passage: "In her heart the woman believes that the birth of a child is the appointed end of sex-fulfilment and the ecstasy only the blossom on its way to become ripe seed. . . . If she were fulfilled, according to her own desire, there would be no

turning back, or if there were, it would be only a momentary turning back of which the man need not be afraid. But he is afraid: and the fear turns to hate". From his writings "we fall into the habit of thinking because Lawrence was so constantly concerned with sex that he loved it". Really "it is a fetter which he longs to shake off. He has the intense hatred felt by the mediæval monk against the humiliation and the cause of it—woman". Naturally his wife resents this. "That the man should regard her as the creature and embodiment of *his* darkness horrifies her, she repudiates it utterly. Really he was practically impotent and wanted to be as a child seeking security and happiness from a protective woman, but he imagined himself as the hardy, indomitable male, demanding complete submission. Incapable of normal sex fulfilment he seeks abnormal fulfilments. But even in his earlier works the note of homo-sexuality is heard, before it becomes explicit in his later novel *Aaron's Rod*, where Lilly (who is Lawrence scarcely disguised) wants a homosexual relation with Aaron to complete his incomplete hetero-sexual relation with his wife. This he calls 'extending marriage'. Other people might find a different name for it".

Naturally when a man reaches a stage like this he has to try and construct a philosophy to rationalize his abnormal cravings. Hopelessly divided between his sexual appetites and his spiritual love for his mother's memory, while yet knowing how it has destroyed him, he portrays growth as duality, *i. e.* an increasing cleavage between the senses and the spirit. A tragic if laughable misinterpretation of decay for growth. Frustrated in his relationships with women and men alike, longing to be free without the courage to achieve freedom, his power motive grows to fantastic dimensions; he must dominate utterly. He talked of "the deep fathomless submission to the heroic soul in a greater man" (meaning himself), and again, "Men must submit to the greater soul in a man for their guidance and women must submit to the positive power-soul for their being". He must go away with a chosen man to make the nucleus of a new society. He must deny reason, find release in mindless sensuality (his own phrase) and find it among pre-mental primitive people. And so he goes forth: first to the Alban Hills, then to Sicily, thence to Sardinia. In each in turn he finds El Dorado—for about a week. For he found that "the mindless human being is malevolent". He was invited to stay at the Benedictine Monastery at Monte Cassino. His description of his stay is vivid: "They were the old-world peasants still about the monastery, with the hard, small bony heads and deep-lined faces and utterly blank minds, crying their speech as crows cry and living their lives as lizards among the rocks, blindly going on with the little job in



hand, the present moment, cut off from all past and future, and having no idea and no sustained emotion, only that eternal will-to-live which makes a tortoise wake up once more in spring, and makes a grasshopper whistle in the moonlight nights even of November". From the heights of Monte Cassino he looked down again on to the modern world. "And here above . . . we were in the Middle Ages. Both worlds were agony to me. But here on the mountain-top was the worst: the past, the poignancy of the not-quite dead past".

"I think one has got to go through with the life down there—get somewhere beyond it. One can't go back," he said.

And so he passed from disillusionment to disillusionment. In Sicily he felt that it would be best to be one of the suave and completely callous demons; but unfortunately he could not stand their company. He found that the Sardinians "have not passed beyond democratic uniformity, they have not reached it. They are beneath, not beyond, the civilization which is as necessary to Lawrence as to any other man who has inherited it". And so like the Wandering Jew, he is driven on and on. He went to the United States, but as his head was full of Aztecs and the novels of Fenimore Cooper it is not surprising that disappointment awaited him again.

To paraphrase Middleton Murry—the question was this: Did he really accept or did he really reject modern life—the life into which fitfully and weakly but yet finally, the spirit of love has entered? He would not decide this; he wanted to be able to proclaim the premental as an ideal and to denounce it as an experienced fact. For he knew that a completely achieved mental consciousness is the distinguishing mark of the modern world—that which makes it modern. That ideal country of his would never be found. Unless he could make himself a whole he would never find the whole of which he could be a part, yet his desire for leadership continued and grew, as did his craving for complete submission of others to his will. But leadership was impossible for a man so completely divided between love and hatred. And, as is usual in such a case, hatred became dominant, and death loomed almost as an escape.

It seems to me, however, that in his last writings he must have got nearer accepting the truth, for he wrote: "We dimly realize that mankind is one, almost one flesh. It is an abstraction, but it is also a physical fact. In some way or other the cotton-workers of Carolina or the rice-growers of China are connected with me, and, to a faint yet real degree, part of me. The vibration of life which they give off reaches me, touches me, and affects me all unknown to me. For we are all more or less connected, all more or less in touch: all

humanity. That is until we have killed the sensitive responses in ourselves, which happens to-day only too often". So he came at last to "accept the Universe" but, gad, he had better have done so earlier. For his physical frame was by now exhausted by the hopeless struggle of his divided personality. It is a story as inevitable as Greek Drama—mother-fixation—the splitting of love into physical and psychical components—impotence—and an attempted compensation for it in a fantastic power motive which became completely asocial, and so destroyed itself. His writing is exhibitionism, but also an attempt to explain himself to himself, for, as he said, "one sheds one's sicknesses in books—repeats and presents again one's emotions to be master of them". Mingled with his turgid philosophy and preposterous physiology there are passages of really lovely comprehension of external nature, and flashes of self-knowledge. But he puts the final verdict on himself into the mouth of one of his characters: "When it comes to doing anything—you sort of fade out—you're nowhere".

One of Osler's profoundest remarks was that we all drag about with us the chains of the original error in which we were trained. It is a truth with many applications—not only to D. H. Lawrence, but to every one of us. We are, for good or evil, the resultant of our heredity and our environment.

Well, that was a platitude, and I seem to see Osler's quizzical smile across the room as I utter it. So I will conclude this attempt to do honour to the memory of a great man. I am thankful that I had the privilege of knowing him. His gaiety, his sanity and his courage were not the least of his many gifts to us. We mourn the dreadful test to which that courage was put in his latter years, a test under which, though his body broke, his courage failed not to the end. Medicine is proud of him, but we may fairly claim that medicine alone could have shaped and developed him thus. "So true it is," as Stephen Paget used to maintain, "So true it is, that it is not we who make our profession, but our profession which makes us."

## SURGICAL APHORISMS.

(Continued from p. 208.)

24.

It may be a wise precaution to make all the arrangements for the performance of a blood transfusion after a very severe operation, even though the necessity for it will probably not arise. Carrying an umbrella will sometimes prevent the rain.

25.

When the necessity for a blood transfusion as an adjunct to a major operation has been foreseen, it is not necessary to keep the donor hovering in the neighbourhood to await the "psychological moment". The blood can be drawn beforehand and kept warm for immediate use. "Blood on the sideboard" means confidence for the operator and safety for the patient.

26.

Blood transfusion done in order to counteract a hæmorrhage need not aim at replacement of the whole volume of blood that has been lost. If a quarter of it is restored to the circulation, physiological requirements will have been satisfied.

27.

Blood transfusion as an aid to surgery may be pursued to its logical conclusion. If a patient is bleeding from an obscure source, transfusion may be repeated as a life-saving measure until the bleeding stops. More than five transfusions will hardly ever be needed.

28.

The surgery of many acute pyogenic infections is strictly comparable to medicine—the surgeon's proper rôle is restricted to watching the patient cure himself.

29.

Brodie's tumour—few people now have a clear idea of what is meant by this name. The association of the name hides the fact that the tumour is merely a glorified fibro-adenoma which tends, in its later stages, to become cystic or even sarcomatous—but these stages, described by Brodie, are now seldom seen.

30.

An apparently polycystic tumour of the breast is not necessarily a "Brodie's tumour"; it may prove to be a colloid carcinoma.

31.

Retraction of the nipple is not diagnostic of carcinoma, though it should always arouse a strong suspicion. It may result from any prolonged irritation in the breast with fibrosis.

32.

Invagination of the nipple is not to be confused with retraction. The former is often seen in young women without any disease. Retraction, to be detected by picking up the nipple, is associated with other signs.

33.

Carcinoma of the breast is a very fatal disease, but patients hardly ever die of the primary lesion.

34.

But every carcinoma is at one stage a local disease which can be cured by local treatment. The chief hope, therefore, for improved results is earlier diagnosis and prompt treatment.

35.

A cancer in any part of the body may be "early" or "late" in two senses—temporal and pathological. The second sense is the only one that matters, since a cancer that has not disseminated or infiltrated widely is pathologically "early", however long it may have been in existence.

GEOFFREY KEYNES.

*(To be continued.)*

## THE HISTORY OF THE HEDGEHOG'S ROSARY.

*(Continued from p. 216.)*

### LEUKÆMIA.

It is remarkable how frequent is the simultaneous discovery of a subject by two workers often unaware of one another's presence, and it is sad to see how these discoveries often degenerate into a childish argument over priority. In leukæmia the recognition was almost simultaneous, but the altercation took place, not over priority, but as to the true explanation of the findings.

In the descriptions of remarkable cases which appeared in the seventeenth and eighteenth centuries, there are to be found a few of large livers and spleens, but none of them are detailed enough to consider as classical descriptions of this disease, and the first accurate account appeared in 1845. John Hughes Bennett (101) was an Edinburgh physician and Lecturer in Pathology to the University; in 1845 he published his case of *Hypertrophy of the Spleen and Liver in which death took place from suppuration of the blood*.

The very remarkable case about to be related derives unusual interest from its similitude in almost every respect to the one just recorded by Dr. Craigie. Although the most evident lesion during life was enlargement of the spleen, I agree with him in thinking that the immediate cause of death was owing to the presence of purulent matter in the blood, notwithstanding the absence of any recent inflammation, or collection of pus in the tissues.

Numerous authors have asserted that they have found purulent matter in the blood, independent of any local inflammation, or abscess from which it could have been derived. Hitherto all such statements have been very vague, because no measures were taken to ascertain whether this purulent-looking matter was really pus. We frequently meet with animal fluids, which, to the naked eye,

resemble pus, although when more minutely examined, they are found deficient in the peculiar cells that characterize that morbid product. Gulliver more especially has pointed out that the colourless coagula which form in the heart and large vessels break down mechanically or by maceration into a pulpy mass of liquid. The purulent collections in the heart and blood-vessels described by Goodsir and Andral are considered by him to be fibrin softened in this manner. Again, we know that the blood in a state of health contains a number of colourless corpuscles, which closely resemble those of pus. Hence has latterly arisen the opinion, that the isolated pus corpuscles described by some authors were only the normal structures of the blood, and that, where after death large intravascular collections of purulent-looking matter were discovered, they were caused by softened colourless coagula.

In the present state of our knowledge, then, as regards this subject, the following case seems to me particularly valuable, as it will serve to demonstrate the existence of true pus, formed universally within the vascular system, independent of any local purulent collection from which it could be derived. The individual entered the clinical ward of the Infirmary under Dr. Christison, to whom I am indebted for the history of the case. The *post mortem* examination and microscopic investigation were conducted with the greatest care by myself, and my assistant Mr. Morris.

John Menteith, aged 28, a slater, married, admitted into the clinical ward of the Royal Infirmary, February 27, 1845. He is of dark complexion, usually healthy and temperate; states that twenty months ago he was affected with great listlessness on exertion, which has continued to this time. In June last he noticed a tumour in the left side of the abdomen, which has gradually increased in size till four months since, when it became stationary.

It was never painful till last week, after the application of three blisters to it; since then several other small tumours have appeared in his neck, axillae, and groins, at first attended with a sharp pain, which has now, however, disappeared from all of them. Before he noticed the tumour he had frequently vomited in the morning. The bowels are usually constipated, appetite good, is not subject to indigestion, has had no vomiting since he noticed the tumour. Has used chiefly purgative medicines, especially croton oil, has employed friction with a liniment, and had the tumour blistered.

At present there appears a large tumour, extending from the ribs to the groins, and from the spinal column to the umbilicus, lying on the left side. It is painful on pressure near its upper part only. Percussion is dull over the tumour; pulse 90; states that for three months past he has not lost in strength. There is slight œdema. To have two pills of iodide of iron morning and evening.

March 13: Died suddenly in the morning.

Section cadaveris, March 19th (four days after death). Externally the body presented a considerable prominence of the ensiform cartilage and false ribs on both sides. The abdomen was contracted, considerable dulness on percussion on left side, which had previously been marked out by a line formed with nitrate of silver.

No ascites or œdema of the limbs.

Blood: The blood throughout the body much changed. In the right cavities of the heart, pulmonary artery, *vena cava*, *vena azygos* external and internal iliac veins, and many of the smaller veins leading into them, it was firmly coagulated and formed a mold of their size and form internally. In the cavities of the heart and *vena cava* the blood when removed was seen to have separated into a red or inferior, and a yellow or superior portion. The red portion was of a brick-red colour, it did not present the dark purple smooth and glossy appearance of a healthy coagulum, but was dull and somewhat granular on section, and when squeezed readily broke down into a grumous pulp. The yellow portion was of a light yellow colour, opaque and dull, in no way resembling the gelatinous appearance of a healthy decolorized clot. When squeezed out of the veins as was sometimes accidentally done where they were divided, it resembled thick creamy pus. In some portions of the veins the clot was wholly formed of red coagulum. In others it was divided into red and yellow. In a few places the yellow formed only a streak or superficial layer upon the red, or covered the latter with spots of various sizes. Whether this coagulum existed in all the veins could only have been ascertained by a complete dissection of the body. It was seen, however, that the femoral veins after passing under Poupart's ligament, were empty and perfectly healthy as far down as the Sartorius muscle.

The external and internal iliac veins were full and distended. The azygos, both axillary and jugular, veins, were full, also the longitudinal, the lateral and other sinuses at the base of the cranium and veins ramifying on the surface of the brain.

In this last situation some of the veins appeared as if full of pus whilst others were gorged with a dark coagulum. In the aorta and external arteries were a few small clots resembling those found in the veins. These vessels, however, were comparatively empty. The basilar artery at the base of the brain was distended with a yellow clot.

Vessels: The arteries and veins themselves were perfectly healthy. Although carefully looked for, in no place could thickening or increased vascularity be observed. Nowhere was the clot adherent to the vessels, but, on the contrary, readily slipped out when an accidental puncture was made in them.

The *spleen* also enormously enlarged with simple hypertrophy. It was of a spindle shape, largest in the centre, tapering towards extremities. It weighed seven pounds twelve ounces. It measured in length fourteen inches; in breadth at its wide part, seven inches; and in thickness, four and a-half inches. Toward its anterior surface was a yellow firm exudation, about an inch deep, and three inches long. The peritoneum, also covering a portion of its anterior surface, was thickened, opaque, and dense over a portion about the size of the hand.

\* \* \*

The *lymphatic glands* were everywhere much enlarged. In the groin they formed a large cluster, some being nearly the size of a small hen's egg, and several being that of a walnut. The axillary glands were similarly affected. The bronchial glands were not only enlarged, but of a dark purple colour, and in some places black, from pigmentary deposit. The mesenteric glands were of a whitish colour, some as large as an almond nut. A cluster of these surrounded and pressed upon the *ductus communis choledochus*. The lumbar glands were of a greenish yellow colour, also enlarged, forming a chain on each side, and in front of the abdominal aorta, more especially at its bifurcation into the iliacs.

*Microscopic Examination.*—The yellow coagulum of the blood was composed of coagulated fibrin filaments, intermixed with numerous pus corpuscles, which could be readily squeezed out from it when pressed between glasses. Where the yellow coagulum was unusually soft, the corpuscles were more numerous and the fibrin was broken down into a diffuent mass, partly molecular and granular, partly composed of the debris of the filaments broken into pieces of various lengths. The corpuscles varied in size from the  $\frac{1}{80}$ th to the  $\frac{1}{120}$ th of a mill. in diameter; they were round, their cell-wall granular, and presented all the appearance of pus corpuscles. That they really were such was proved by the action of water and of acetic acid, the former of which caused them to swell and lose their granular appearance, whilst the latter dissolved the cell-wall and caused a distinct nucleus to appear.

\* \* \*

The next question is, how were these corpuscles formed? Pus has long been considered as one, if not the most characteristic proofs of preceding acute inflammation. But in the case before us, what part was recently inflamed? There was none. Piörny and others have spoken of an inflammation of the blood, a true hematitis; and certainly if we can imagine such a lesion, the present must be an instance of it. But it would require no laboured argument to show, that such a view is entirely opposed to all we know of the phenomena of inflammation. Without entering into this discussion, however, I shall assume it to have been satisfactorily demonstrated that we can form no idea of this process, without the occurrence of exudation from the blood-vessels, and that, consequently, the expression inflammation of the blood is an error in terms. A moment's reflection will make it evident that all our ideas of, and facts connected with inflammation are associated with some local change in the economy. The constitutional disturbances connected with it we invariably ascribe to phlegmasia or fever, which pathologists hitherto have always separated. Unless, therefore, it could be shown that inflammation and fever were like processes, we must conclude that the alteration of the blood in this case was independent of inflammation properly so called.

But can we explain the production of pus independent of inflammation? We reply in the affirmative. The corpuscles of pus arise in a blastema formed of *Liquor Sanguinis*. This fluid, when exuded through the blood-vessels, does not thereby in itself undergo any change. If any circumstances, therefore, should arise by means of which it could be separated from the red corpuscles within the vessels there is no reason why these pus cells should not be formed in it. Facts point out that this coagulation happens not unfrequently.



About a month later Rudolf Virchow (102), while he was an assistant at Froriep's clinic, published a case of leukæmia, and it will be useful to reproduce his post-mortem findings and conclusions in order to contrast them with those of Hughes Bennett.

*Section*, twenty-eight hours after death. On the palmar surfaces of both hands, incisions with a discolored blackish appearance which lead to superficial collections of pus which do not penetrate the fascia, and contain a reddish, fairly firm pus. The adjacent lymphatics and blood-vessels normal. In the muscular tissue of the flexors some old cysticercus cysts. In the veins above, some discolored blood, scarcely red, poorly clotted. As I examine the further course of the blood-vessels; there was everywhere in them a pus like mass. The heart which was somewhat enlarged, was completely filled with large, loosely adherent, greenish, yellowish white coagula, which crumbled under the fingers, could be easily smeared about, not at all adherent, to the walls and which looked exactly like firm pus. The same mass was also present in the aorta and in the larger arteries, in the veins of the body cavities and in the veins of the lower extremities. The veins with thin walls presented the picture of canals filled with pus, and the surface of the heart and of the meninges, whose veins were markedly dilated by their pus-like contents, seemed to be covered with solid yellowish white cords. Everywhere this material lay free in the vessels, whose walls appeared in no way changed. All organs very pale. The lungs normal except for a slight bronchial catarrh. The intestinal tract was normal except for a succulent appearance of the mucosa. Liver not essentially changed. Spleen enormously hypertrophied, nearly a foot long, very heavy, dark brownish red, with a board-like firmness, crumbling, on cross-section pale and apparently composed of a homogenous tissue, the cut section slightly shiny, wax-like, thus resembling a large ague cake. Kidneys normal, only in the calices and pelvis a large mass of uric acid stones, which were partly small particles the size of hemp-seeds, partly in masses the size of cherry-stones covering the papillæ and partially filling the upper portion of the ureter. Genitalia normal.

The yellowish white almost greenish mass which the vessels contained and which was collected from the heart and the great vessels, weighed nearly 2 pounds. When removed with some care, it had the appearance of a loose coagulum; but when placed on an uneven surface it fell apart from its own weight and the microscope showed no adherent masses of fibrin. Except for a very few red blood corpuscles, the greater part was composed of colorless or white corpuscles, which also occur in normal blood, namely, small, somewhat irregular protein molecules, larger, nucleated, fatty capsules without nuclei and granular cells with a round, horse-shoe-shaped or clover-like nuclei or with several bowl-shaped, distinct nuclei. The larger of these cells had a slightly yellowish appearance. The relationship between the pigmented and colorless blood corpuscles seemed to be reversed here from that of normal blood, for the white corpuscles seemed to be the rule and the red corpuscles a kind of exception. When I therefore speak of *white blood*, so I mean in fact a blood, in which the proportion between the red and white blood corpuscles is reversed, without noting any mixture of strange chemical or morphological elements.

*Considerations.* It would be premature to draw sweeping conclusions from a single case, so unusual, since the relationships are not so clear and the history of the disease contains so many gaps. The older accounts of white blood are quite useless because a microscopic examination is lacking. They relate mostly to loss of blood by hemorrhage, fasting, etc. Now it is further known since Hippocrates that the diseases of the spleen rather frequently produce nose-bleed. In the present case we can construct the following etiological succession: splenic tumour, nose-bleed, white blood. The cough and the diarrhoea whose persistence was due to no local lesions, as well as the hydropic infiltration, the nose-bleed, the furuncular and pustular eruption, are all to be considered as signs of the increasing dissolution of the blood. The excessive formation of white blood cells (lymph corpuscles) cannot be explained by increased flow of chile, since chylication is not especially active in the presence of diarrhoea, but this all speaks for an increased formation of the cells on the blood, which suggest a great mass of small molecules (primary nuclei). Also it should not be overlooked that the cough, diarrhoea and edema were present before the nose-bleed, and that the remarkable change of the red blood into white blood could have

taken place only quite recently, because the blood from the epistaxis was always red.

I have presented these observations only with the purpose of showing that such a remarkable and unusual case may have so many relationships with further investigations and so many suggestions for explaining other questions, but it remains a rather uncertain subject for positive proof and conclusion so long as it itself remains unexplained. A case very similar and very well described, has appeared in the recent literature but unfortunately the history of the patient's illness is lacking.

*Lautner* (Report of the Proceedings of the Pathological Institute of the Vienna General Hospital, directed by Prof. Rokitsky in the *Zeitschr. der k. k. Ges. der Ärzte zu Wien* 1845 Ba. IS 488) describes the following: general pyemia in a locksmith aged 33. Decubitus over the sacral area, which extends into the subcutaneous tissue. The skin of the lower abdomen, back and posterior portions of the thighs covered with small abscesses varying in size from a pea to a groschen and filled with pus. The pleura at the base of the right lung covered with a delicate membranous coagulated exudate. In most of the pulmonary vessels, large and small, there were yellowish-green tough coagula, in the posterior lower portion of the right lung there were two consolidated areas, large as walnuts. In the cavities and great vessels greenish yellow coagula. The liver is three times its normal size, weighs 6 pounds 4 ounces, pale, fatty, very anemic and dampened with a cloudy pus-like fluid; the spleen 5 pounds 14 ounces, heavy, coarse, and on the upper third of the convex surface shows a deposit the size of a walnut, partly pale yellow, partly dark red reticulated and fibrinous: the rest of the parenchyma brownish red, infiltrated like bacon. The lymph glands around the pancreas are swollen to the size of a pigeon's egg, pale reddish and infiltrated with a sticky greenish yellow pus-like fluid. Both kidneys pale, infiltrated with a cloudy discolored fluid.

It does not seem to me demonstrated that this case should be included under the term pyemia, although the purulent infiltration of the different parts seems to speak for this. The complete identity of the colorless blood corpuscles (lymph corpuscles) with pus, makes a conclusion uncertain even when the microscope is employed, as the case I described shows. The usual composition of the blood in pyemia is entirely different, not because of the presence of pus in the blood but because it is characterized by a liquefaction and destruction of the blood components and by a tendency to the production of exudates with purulent metamorphosis. It seems to me clear that in this case there is not a purulent infiltration into the tissues but a purulent change in the exudate which has taken place through a stasis of the blood in various places. The course of the hepatized places in the lung and spleen seem to prove this; the abscesses of hands probably had a similar origin as well as the purulent eruption on the nose and hands. In the case from Vienna there were apparently no hemorrhages and yet there was white blood and a splenic tumor. Recent observers (*Donné*) have ascribed to the spleen an especial rôle in the transformation of red corpuscles into white. According to observations made repeatedly the loss of the spleen produces no similar condition: could a diseased spleen have such an effect? Is nose-bleed in splenic disease caused by a similar blood disease? Perhaps my report will cause one of the Viennese physicians to publish the history of the patient's disease in greater detail: I should consider myself lucky to have aided science with a new, and it seems to me, not unimportant fact.

A. H. T. R.-S.

(To be concluded.)

## THE ANÆSTHETIC.



HAT a momentous event was the first paid work one did after qualification.

When the opportunity came to me I had scarcely recovered from the headache brought on by the excitement of the night before, when after prolonged struggles and misunderstanding, I at last passed the College Finals.



While I was seated on the brim of the Fountain, receiving the congratulations of my friends and dispensing sympathy to the less fortunate, Mr. Sargent, the Registrar of those days, was seen approaching.

Apart from his official duties Sargent ran a kind of agency for the sale and purchase of practices, and would supply a *locum* at the very shortest notice.

After gravely congratulating me on my achievement, he asked me, before the admiring circle, if I was free to do a *locum* at the Metropolitan Hospital. Blushingly I admitted I was disengaged and could go at once; and off I went to the Kingsland Road, to act as temporary anaesthetist.

On my arrival at the hospital I was told to hurry to the theatre, where the senior surgeon was waiting to operate.

I had scarcely had time to don a white coat when the patient was brought in and placed upon the operating table, and I prepared to administer a perfect anaesthetic on the method of "Dicky" Gill.

Apart from the professional fat women to be seen at country fairs, this one was the fattest and biggest I ever saw.

A veritable mountain of a woman, she needed support on both sides to prevent her from rolling off the table.

Nothing daunted, I got to work trying at the same time to appear at my ease although really as nervous as could be.

After a few reassuring words to the quaking mass, who was, if possible, more nervous than I, the induction commenced.

The anaesthetic was, of course, chloroform, given as taught us by Gill; three squirts on a piece of lint, held in the fingers of the left hand. After the proper interval the lint was deftly reversed by a process of sleight-of-hand, the result of long practice, and three further jets of chloroform damped the lint.

Senior surgeon or not, I was taking no risks with this, my first case, and was not going to be hurried. Out of the corner of my eye I saw the surgeon showing signs of impatience, but with calm deliberation I kept up the steady Gill rhythm. At last, after what seemed to me an age, the patient began to go off—or was it only sleep simulating anaesthesia? No, it was the real thing, steady deep respirations, pupils all right, everything as it should be, and I informed the surgeon that he might begin.

But after all she must have been asleep, and my voice half-awakened her, for suddenly in a loud, clear strain, which filled every corner of the theatre, she sang, "Give me just a little love, one tiny kiss", and went on singing these words over and over again, and this in spite of my

breaking all the rules of Mr. Gill by giving her large and repeated doses of chloroform.

It must have been for at least ten minutes that she continued to implore me to give her just a little love, "one tiny kiss", and the shattering song only ceased as the dregs of the chloroform bottle were in sight.

But all the same, even if I did mistake slumber for anaesthesia, I still consider the remark of the surgeon quite uncalled for when, in front of everybody, he asked me if the patient was an old friend of mine.

PHILIP GOSSE.

## STUDENTS' UNION.

### RUGBY CLUB PROSPECTS, 1933-34.

It will be observed by those interested in the Club that there have been included some additional fixtures for the coming season, notably those against three other hospitals. For the past few seasons it has been usual to play the "London" in a friendly, but this year, and in future, it is hoped that a few more of these matches may be possible, for apart from the natural goodwill that is bound to arise, we are assured of having a good game, without that tenseness and ferocity displayed in a cup-tie. The critics may be confounded by learning that inter-hospital rugby is not all ignorance and brute force. Among other notable fixtures are matches against Otley, University College, Dublin, Army Trial XV and Bridgewater Albion.

It is usual to look upon the coming season with great optimism in spite of what has gone before. But this year we may surely look forward to a successful and enjoyable season, although we are going to miss, in more senses than one, that great personality and grand little player, "Jimmy" Taylor, who probably has had more to do with our successes in the past few seasons than anyone else. The good wishes of the whole Club go with him, and we hope that he will still play rugby for a season or two to come.

The team will be captained this year by E. M. Darmady, with J. M. Jackson as vice-captain. We will be lucky in having the same pack that did so well under the inspiring leadership of W. M. Capper last season, and in addition there are some very useful members of the "A" XV who on their form of last season should gain a place.

As usual the back division will be a problem. We all know what to expect of C. R. Morison at full back; he gives the team that feeling of confidence that is so vital to its *morale* under any circumstances. But there has been a dearth of true attacking centres for the past few seasons, and this fact has to a great extent nullified the good work done by the rest of the team. This is by no means detrimental to the centres of the past, who have played magnificently, especially as everyone who had the good fortune to see the Cup final last season, when they held the speedy Guy's backs for the greater part of the game, behind a beaten pack. They have been sound without being brilliant, and seemed to lack finish, which is tragic when a club possesses such first-class wings as J. G. Nel and L. M. Curtiss. But it is going to be difficult to fill J. T. C. Taylor's place at scrum-half, a position on which success depends so much.

Practice games will be held on September 16th and 23rd, and it is hoped that all members of the Senior three XV's will make an effort to get fit for them. This year there should be ample opportunities for everyone, as the Merchant Taylors' site will shortly open for training facilities. Fives and such games are a very useful form of exercise to ensure fitness. The Students' Union have kindly given the Club a practice pitch on the site, on which it is hoped to erect a goal-post, which will be badly needed if the place-kicking is to improve.

To the Junior teams we wish the best of luck, and hope that their enthusiasm will be rewarded with success.

And finally it is hoped that we will get even better support than hitherto at home matches.

J. D. W.

## Officers for Season 1933-34.

President : Dr. J. D. Barris.  
 Captain : E. M. Darmady.  
 Vice-Captain : J. M. Jackson.  
 Hon. Treas. : J. R. Jenkins.  
 Hon. Sec. : J. D. Wilson.  
 Capt. "A" XV : E. E. Harris.  
 Hon. Sec. "A" XV : C. M. Dransfield.  
 Hon. Secs. :  
 Extra "A" XV : R. Hanbury-Webber.  
 "B" XV : J. M. Macdonald.  
 Extra "B" XV : A. H. Jack.  
 "C" XV : H. N. Rees.  
 Extra "C" XV : J. Longland.

## Fixtures, 1933-34.

1933.	
Sat., Sept. 30.	Middlesex Hospital . . . Home.
" Oct. 7.	Old Leysians . . . "
Wed., " 11.	St. Thomas's Hospital . . . "
Sat., " 14.	Rugby . . . Away.
Wed., " 18.	London Hospital . . . "
Sat., " 21.	Bedford . . . "
Wed., " 25.	Cambridge University . . . Home.
Sat., " 28.	Wasps . . . Away.
" Nov. 4.	London Irish . . . "
" " 11.	University College, Dublin . . . Home.
Wed., " 15.	Army Trial XV . . . "
Sat., " 18.	Moseley . . . Away.
" " 25.	Devonport Services . . . "
Mon., " 27.	R.N.E.C., Keyham . . . "
Sat., Dec. 2.	Rosslyn Park . . . Home.
Wed., " 6.	R.M.A. . . . Away.
Sat., " 9.	Northampton . . . Home.
" " 16.	Old Paulines . . . Away.
" " 23.	Xmas . . . "
" " 30.	Redruth . . . Home.
1934.	
Sat., Jan. 6.	Harlequins . . . Home.
" " 13.	O.M.Ts. . . . Away.
" " 20.	Coventry . . . Home.
" " 27.	Old Alleynians . . . Away.
" Feb. 3.	Halifax . . . "
" " 10.	Pontypool . . . Home.
" " 17.	Old Paulines . . . "
" " 24.	Otley . . . "
" Mar. 3.	Moseley . . . "
" " 10.	Devonport Services . . . "
" " 17.	Bridgewater Albion . . . Away.
" " 24.	Pontypool . . . "
" " 31.	Easter . . . "
Tues., Apr. 3.	Bristol . . . Away.
Sat., " 7.	Torquay . . . "
Mon., " 9.	Redruth . . . "
Tues., " 10.	Falmouth . . . "

## CRICKET CLUB.

Of major importance during the past months has been the cup-tie success of both 1st and 2nd XI's. With King's as opponents in each case both teams conquered the precarious, and emerged successfully from the critical ordeal of semi-final cup-ties. Pallid reflection might indicate that only individuality saved the day, but since the pooling of individual effort is a synonym for efficiency, the true balance is preserved. Superlative in the reckoning stand out Nunn's intuitive leadership, Mundy's all-round skill and Bamford's wicket-keeping.

## 1ST XI.

## ST. BARTHOLOMEW'S HOSPITAL v. MIDHURST.

Played on Thursday, July 20th. Lost.

This game was played on the picturesque Midhurst ground, but the effectiveness of our display would hardly illumine a province. Even a charitable beneficence could not be reconciled to our dismissal for 77 runs on a perfect wicket. There was a definite lack of orderliness about our batmanship, for the bowling possessed only average guile.

Our opponents added 90 runs for the second wicket and ultimately totalled 174. Our bowling was very steady, Dransfield taking 4 for 46 in 17 overs. In exculpation, we might add that the side was not at full strength and therefore we were not unduly perturbed.

## ST. BARTHOLOMEW'S HOSPITAL v. KING'S COLLEGE HOSPITAL.

## Semi-final Cup-tie.

Played on July 23rd at Winchmore Hill. Drawn.

Batting on a fast pitch, our opening was eminently cheerful in that Nunn (80) and Boney (102) put on 145 runs for the first wicket. Both showed a positive batmanship which intimidated all but good-length bowling. Wedd followed with a quick 63, scored with his usual freedom, and we were enabled to declare at 336 for 7 wickets. Victory seemed assured when 2 wickets had fallen for 11 runs, but in spite of superb bowling by Nunn and expert wicket-keeping by Bamford, the third wicket added 160 runs, and when time was called our opponents had made 266 runs for 9 wickets. Never has Bamford shown such an art as on this occasion; with three men brilliantly stumped and two caught, he was responsible for 5 of the 9 wickets which fell.

In such a picturesque contest, Boney's century, Nunn's display and Bamford's skill stand out, whilst our opponents are to be congratulated on such a stubborn reply to an intimidating total.

## Scores:

## ST. BARTHOLOMEW'S HOSPITAL.

Boney, c Miles, b Kerr	102
Nunn, b Stokes	80
Morison, b Stokes	0
Wedd, c Miles, b Walters	63
Gabb, c Walters, b Stokes	19
Wheeler, b Ledger	8
Wade, b Stokes	33
Wilson, not out	9
Mundy, not out	4
Dransfield	Did not bat.
Bamford	Did not bat.
Extras	18

Total (for 7 wks., dec.) 336

## KING'S COLLEGE HOSPITAL.

Miles, b Wedd	87
Davis, c Bamford, b Nunn	0
Carey, c Bamford, b Nunn	2
Ledger, st Bamford, b Wedd	81
Wise, st Bamford, b Nunn	25
Coombes, b Mundy	36
Stokes, st Bamford, b Wedd	11
Walters, not out	2
Kerr, b Wedd	0
Mitchell-Smith, b Mundy	0
Bynoe, not out	0
Extras	22

Total (for 9 wks.) 266

Bowling: Mundy, 2 for 84;  
 Nunn, 3 for 49; Wedd, 4 for 61;  
 Gabb, 0 for 30; Wade, 0 for 23.

The replay was played at Dog Kennel Hill on Monday, July 31st, Won by 134 runs.

The side was depleted, Nunn and Gabb being unable to play, and accordingly victory was all the more creditable. Again we batted first, and again Boney and Wedd proved their practical skill in scoring 61 and 41 respectively. The issue seemed very doubtful, however, when the seventh wicket fell at 139, but Mundy and Dransfield, moving on eager feet, added 60; Baker and Mundy then added 60 more precious runs and so we totalled 263. Mundy's innings of 76, coming as it did at a critical time, was a glorious effort for one leading the side. Not only that, for the immediate sequence was even more epic in that he took 6 wickets for 43 runs and King's were all out for 129 runs.

## Scores:

## ST. BARTHOLOMEW'S HOSPITAL.

Boney, c Ledger, b Wilson	61
Masina, b Kerr	2
Morison, b Kerr	10
Wedd, b Kerr	41
Dolly, c Carey, b Kerr	2
Wade, b Kerr	4
Wilson, b Wilson	1
Dransfield, b Stokes	27
Mundy, c Miles, b Wilson	76
Baker, b Ledger	20
Bamford, not out	0
Extras	19

Total 263

## KING'S COLLEGE HOSPITAL.

Davis, lbw, b Mundy	9
Wilson, lbw, b Mundy	0
Miles, b Mundy	0
Ledger, b Wedd	8
Carey, b Mundy	6
Stokes, b Mundy	1
Fearnley, b Dolly	29
Coombes, b Mundy	10
Kerr, b Wedd	2
Walters, not out	53
Bynoe, b Dransfield	5
Extras	6

Total 129

Bowling: Mundy, 6 for 43;  
 Dransfield, 1 for 24; Wedd, 2  
 for 38; Dolly, 1 for 18.

## 2ND XI.

ST. BARTHOLOMEW'S HOSPITAL v. KING'S COLLEGE HOSPITAL.  
*Semi-final Cup-tie.*

Played at Denmark Hill. Won by 5 wickets.

This was a glorious victory, for we triumphed by sheer batting flexibility alone. In facing a total of 245 runs, our methods were vigorous to a degree, thanks to Maidlow and Baker, who slammed through the covers, cut with freedom and ran with zest; both narrowly failed to achieve a century, but even arithmetical glamour cannot dwarf such practical innings.

Scores:

KING'S COLLEGE HOSPITAL.		ST. BARTHOLOMEW'S HOSPITAL.	
Fearnley, b Baker	56	Capper, b Mason	0
Dacie, c Masina, b Baker	10	Hindley, b Hurst	2
Copesake, c Hindley, b Hayes	0	Maidlow, st Dacie, b Peel	99
Prole, c Hayes, b Harris	77	Masina, c McClintock, b Lassen	8
Hurst, b Crosse	35	Baker, not out	96
McClintock, lbw, b Harris	0	Mundy, (M. L.), b Lassen	16
Mason, c Capper, b Harris	0	Crosse, not out	13
Peel, c Baker, b Crosse	38	Hayes	Did not bat.
Lassen, b Crosse	5	Howell	
Stone, not out	7	Berry	
Ledger, not out	6	Harris	
Extras	11	Extras	16
Total (for 9 wks., dec.)	245	Total (for 5 wks.)	250

It is therefore gratifying to record that, for the third successive year, both teams enter the final ties. The strength of our batting is obvious, our fielding propensities are very sound, whilst the bowling has been and can be brilliant. Our success will depend very probably on the latter factor, for the Thomas's batting capabilities are well founded on result. The 1st XI final will be played on September 8th, 9th and 10th at Denmark Hill; it will be a two innings' game.

The 2nd XI final tie will be played on Saturday, September 2nd, at Winchmore Hill, our opponents being London Hospital 2nd. The game will start at 11 a.m.

We hope to report in the October JOURNAL that both teams have been successful in retaining Senior and Junior Cricket Cups; if not, then we shall take the hap of our deeds. C. M. D.

## CORRESPONDENCE.

To the Editor, 'St. Bartholomew's Hospital Journal'.

DEAR SIR,—I read with considerable interest the correspondence concerning the Hospital Arms published in the July number of the JOURNAL. I took the opportunity, when at Winchester recently, to try and find out more about the Lillebone Reliquary. This appears to have been given to the Cathedral by William de Lillebon or Lislebon, who also gave them the Manor of Brandesbury in Hampshire. The chevron is also given as the Arms of Walter de Lillebon, c. 1277-1287, in the Arden Roll. From this we may deduce that the Lillebon family used the black and white chevron at this date, and that they were probably a Hampshire family.

At this early period, heraldry in relation to families was not very systematized, and as in the later records, made when the heralds toured England with a view to examining the rights and wrongs of the claims which families made to their armorial bearings, there is no reference to the Lillebon family, the presumption is that they had been wiped out by battle or disease; at any rate, no one of the name claimed the Arms or disputed the right of the Lawsons of Osworth to use them. If, therefore, the Hospital adopted them because of any connection with the Lillebon family, this connection must have been at a very early date.

The salient feature in the Waking coat of arms is a pelican. Bishop Waking's arms were a pelican, and it is these which appear as far as I can make out, on the church at Little Waking. I have traced, as far as I can, the owners of the manors of Great and Little Waking, but none of them appear to have borne the Hospital Arms, so the ownership of this manor by the Hospital would not seem to have been the source of inspiration.

With regard to Dr. Maidlow's contention that the exemplification of the arms, which appears opposite p. 238 in vol. i of Dr. Norman

Moore's invaluable book, is prior to Cok's *Cartulary*, surely this illustration is a page from the *Cartulary* itself, which I understand dates from the reign of Henry VI.

I am afraid I must differ from Dr. G. Dru Drury in his opinion that it is a "logical conclusion" to include a crest as well as supporters. In the days when heraldry was part of the military uniform and not mainly decorative, a crest was only displayed on the helmet of its owner, consequently, many people consider it more correct that a corporate body, which has no head upon which to wear a helmet, should not include a crest in their armorial bearings, although, of course, there are plenty of precedents for the inclusion of a crest if so desired, as may be instanced by the arms of the city companies, which have both crest and supporters. Dr. Drury has misinterpreted the design in describing it as quarterly. On the contrary, it is a single shield, charged with a cross, and bearing certain devices, placed in the quarters so formed; quite a different thing from a quarterly coat recording the perpetuating of arms derived from the marriage with heiresses.

In general, I agree that there is a lot to be said for not changing the Hospital Arms. There is no reason, however, that the Hospital should not commemorate their development and increased importance by taking unto themselves supporters.

If the Hospital do not want to use the coat combining Hospital and Priory, the Medical College, to be set up in Charterhouse Square, might like to take it on, without supporters, but with a crest instead. I think they should have arms of their own, based on the Hospital but not identical, so the design, less supporters, would do very well.

Yours faithfully,

PHILIP W. KERR,  
Rouge Croix.

College of Arms,  
Queen Victoria Street, E.C. 4;  
August 23rd, 1933.

## REVIEW.

MODERN BIRTH CONTROL METHODS. By GEORGE RYLEY SCOTT.  
(John Bale, Sons & Danielsson, Ltd.) Pp. 209. 7s. 6d.

Mr. Scott, in a book written presumably for the general public, sets out to "review calmly and without prejudice the known methods of avoiding conception", and in his introduction states that he is concerned with the methods rather than with the ethics of his subject. But he is wrong in thinking that he is "almost alone in voicing this viewpoint". Dean Inge, writing nearly fifteen years ago in the *Edinburgh Review*, says that birth control is "emphatically a matter in which every man and woman must judge for themselves, and must refrain from judging others".

There is a pleasant sanity about this book; the various methods are described with their pros and cons in straightforward fashion, the author rightly stressing the importance of a combination of methods. Full directions for obtaining contraceptives, a list of clinics and a selected bibliography are included in the appendix. Practitioners will find this a useful book, free from fads, which may be recommended to the more intelligent patient.

## EXAMINATIONS, ETC.

## University of Cambridge.

Second Examination for Medical and Surgical Degrees,  
Easter Term, 1933.

Part II.—Brennan, E. B., Edwards, T. A. W., Oppenheimer, G., Thackray, A. C.

Third Examination for Medical and Surgical Degrees,  
Easter Term, 1933.

Part I.—Briggs, G. O. A., Cohen, E. L., Hindley, G. T., Houlton, A. C. L.

Part II.—Berry, W. T. C., Briggs, G. O. A., Carr, C. M., Cohen, E. L., Ghey, P. H. R., Groves, J. N., Langford, A. W., Morel, M. P., More Nisbett, J. G., Murless, B. C., Sykes, R. A., Thomas, G. W., Williams, R. H. H., Wilson, J.

## University of London.

## M.D. Examination, July, 1933.

Branch I (Medicine).—Page, A. P. M., Roberts, J. H. O., Watkin, J. H.

**First Examination for Medical Degrees, July, 1933.**

Allen, W. H. E., Ballantyne, J. C., Banaji, P. B., Boatman, D. W., Butler, K. A., Dobree, J. H., Dunn, D. M., Edwards, J. A. C., Evans, D. G., Evans, E. O., Evill, C. C., \*Fagg, C. G., Frazer, A. L., Golledge, N. H. H., Hall, W. S., Harrisson, G. J., Jayes, P. H., Kruatrachue, G., McMahon, R. J. H., Morse, D. V., Parkinson, T., Phillips, B. M., Pickering, G. H., Porter, A. S., Rees, H. N., Reilly, C. P. C., Staley, G. R., Swinstead, P. D., Thomas, W. I., Upshon, H. M., Vandy, K. W., Young, N. A. F.

\* Awarded a mark of distinction in Physics.

**Second Examination for Medical Degrees, July, 1933.**

**Part I.**—Bacon, A. H., Braines, F. M., Brown, K. C., Burnham-Slipper, C. N., Carey, C. J., Cawthorne, J. E., Cunningham, A. G., Dunn, J. R., Evans, D. G., Foster, W. B., Frewen, W. K., Goodrich, B. H., Hill, P. G., Jack, A. H., Jamieson, J. G., Jordan, A., Phillips, B. M., Pickering, G. H., Ramsay, F., Rendall, D. C. S., Thomas, W. I., Thomson, A. H., Waring, J. W. B., Welply, R.  
**Part II.**—Armstrong, J. H., Barrett, R. H., Cates, J. E., Cobb, W. A., Dastur, H. K., Knight, F. D. W., Lewis, C. L., Roy, A. N., Royston, G. R., Smyth, E. H. J., Stephens, A., Vahrman, J., Williams, A. M., Youngman, J. G.

**Third (M.B., B.S.) Examination for Medical Degrees, May, 1933.**

Cunningham, G. J., Hackett, L. J., McOwan, B. M., Magnus, H. A., Snell, V. C., Trueman, R. S., Weddell, A. G. M., Williams, H. M.

**Supplementary Pass List.**

**Group I.**—Harris, R. V., Morrison, R. J. G.

**Group II.**—Beard, A. J. W., Cohen, P., George, W. F. T., Thomson, D. M.

**Conjoint Examination Board.****Pre-Medical Examination, July, 1933.**

**Chemistry.**—Grant, D. S., Huddleston, C., Jones, D. A. V., Redman, V. L.

**Physics.**—Grant, D. S., Huddleston, C., Jones, D. A. V., Redman, V. L.

**Biology.**—Anklesaria, J. M., Dean, D. W. J., Halper, N. H., Pallot, K. R., Webb, C., Wedd, J. R. K.

**First Examination, July, 1933.**

**Anatomy.**—Berry, J. G., Evans, A. H., Gardiner, L. E., Jones-Roberts, W. A. D., Owen, W. A., Scott, K. B., Smith, J. B. G.

**Physiology.**—Berry, J. G., Evans, A. H., Gardiner, L. E., Hicks, W. R., Jones-Roberts, W. A. D., Maidlow, W. M., Owen, W. A., Smith, J. B. G.

**Pharmacology.**—Adel, M., Ball, P. H., Bensley, W. E. C., Moynahan, D. J. M., Shemilt, W. P., Weston, C.

**Final Examination, July, 1933.**

The following students have completed the Examinations for the Diplomas of M.R.C.S., L.R.C.P.:

Boney, A. R., Fear, R. G., Fletcher, C., Fountaine, E. C., Hadfield, S. J., Harris, R. V., Harvey, K. J., Hugh, H. C., Jackson, B. F., McGavin, D. B., Mason, T. O., Naidu, C. R., Oxley, W. M., Sen, S. K., Squire, J. A., Swain, V. A. J., Thomas, D. M. E., Vaid, J. R., Wenger, R. A. L.

**L.S.A.****Primary Examination, July, 1933.**

**Anatomy.**—Anderson, J. D., Evans, A. H.

**Physiology.**—Mills, C. W.

**CHANGES OF ADDRESS.**

BULL, L. J. FORMAN, Nuku'alofa, Tonga, Pacific Islands.  
 GREEN, F. H. K., 138, Dedford Court Mansions, W.C. 1. (Tel. Museum 0368.)

JENKINSON, Surg.-Lt. S., R.N., Royal Naval Barracks, Devonport.  
 UNDERWOOD, W. E., 20, Upper Wimpole Street, W. 1. (Tel. Welbeck 3640.)

WARE, H. A., 10, St. Andrew's Street North, Bury St. Edmunds. (Tel. 270.)

WEHLBURG, T. H., Escombe Street, Port Shepstone, Natal.

**APPOINTMENTS.**

BULL, L. J. FORMAN, M.B., B.S.(Lond.), appointed Chief Medical Officer to the Government of Tonga, Pacific Islands.

HUNT, W., M.R.C.S., L.R.C.P., appointed Assistant Medical Officer to the Leicester and Rutland Mental Hospital, Narborough, near Leicester.

**BIRTHS.**

BURGESS.—On August 11th, 1933, at Lauriston House, Chipping Ongar, Essex, to Margaret (*née* Wright), wife of Dr. W. J. Burgess—a son.

DURDEN SMITH.—On August 18th, 1933, at 101, Richmond Park Road, East Sheen, to Yvonne (*née* Neill), and Anthony Durden Smith—a son (Neil).

MCCURRICH.—On July 28th, 1933, at 20, Devonshire Place, W. 1, to Bettine, wife of H. J. McCurich, M.S., F.R.C.S., of Hove, Sussex—a son.

MACLAY.—On July 4th, 1933, at 1, Orme Square, London, W. 2, to Dorothy, wife of Dr. the Hon. W. S. MacLay—a daughter.

MORRIS.—On July 30th, 1933, to Margaret Maude, wife of Leslie Morris, M.D., F.R.C.S., of 15, Stoneygate Road, Leicester—a daughter.

ROBSON.—On July 3rd, 1933, to Edith (*née* Knappe), wife of John A. Robson—a son.

SEYMOUR-ISAACS.—On July 17th, 1933, to Leonora Milne (*née* Mackenzie), wife of H. N. Seymour-Isaacs, of 106, Farm Road, Morden—a daughter (prematurely).

WROTH.—On June 26th, 1933, at Alndyke, Horley, Surrey, to Violet, wife of Charles Wroth—a son.

**MARRIAGES.**

HANKEY—COULSON.—On June 10th, 1933, at Christ Church, North Shields, by the Vicar, Canon Milner, George Trevor, elder son of Mr. and Mrs. J. Trevor Hankey, of Bellhurst, Lingfield, Surrey, to Norah, youngest daughter of Mrs. and the late R. H. G. Coulson, of Alma Place, North Shields.

RICHARDS—MURRAY.—On August 3rd, 1933, at St. Botolph's Church, Cambridge, by the Rev. J. O. F. Murray, D.D. (father of the bride), assisted by the Rev. A. E. N. Hitchcock, Francis Alan, elder son of Mr. and Mrs. R. A. Richards, of 7, Duppas Hill Road, Croydon, to Mary Loveday, only daughter of the Rev. and Mrs. J. O. F. Murray, of 15, Selwyn Gardens, Cambridge.

WOOD-SMITH—LOANE.—On August 12th, 1933, in London, Francis Geoffrey, son of Mr. and Mrs. Wood-Smith, Studland Lodge, Walton-on-Thames, to Joan Edith, daughter of Mr. and Mrs. Loane, of Woodthorpe, The Thrupp, Gloucestershire.

**DEATHS.**

ANDERSON.—On July 28th, 1933, at 11, Spa Road, Boscombe, Alexander Richard Anderson, C.B.E., F.R.C.S.

CAPON.—On August 9th, 1933, at Pine View, Sonning Common, Reading, Herbert James Capon, M.D., L.R.C.P., M.R.C.S., L.S.A. (of the Middle Temple), Barrister-at-Law, aged 82.

GILES.—On July 4th, 1933, suddenly, at Santander, Spain, Leonard Thomason Giles, F.R.C.S., of Brockenhurst, Hants, aged 64.

MAIDLOW.—On July 29th, 1933, after a brief illness, William Harvey Maidlow, M.D., F.R.C.S., of Bay House, Ilminster, Somerset, aged 65.

TOYE.—On July 29th, 1933, at Stanhope, Bideford, Devon, Mary Ellen, wife of E. J. Toye, M.D.(Lond.), F.R.C.S.

TROTTER.—On August 5th, 1933, at Bishopsgarth, Stockton-on-Tees, Walter Octavius Trotter, M.R.C.S., L.R.C.P., J.P., aged 75.

VERCO.—On July 30th, 1933, at Adelaide, Australia, Sir Joseph Cooke Verco, M.D., F.R.C.S., aged 82.

**NOTICE.**

All Communications, Articles, Letters, Notices, or Books for review should be forwarded, accompanied by the name of the sender, to the Editor, ST. BARTHOLOMEW'S HOSPITAL JOURNAL, St. Bartholomew's Hospital, E.C. 1.

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All Communications, financial or otherwise, relative to Advertisements ONLY should be addressed to ADVERTISEMENT MANAGER, The Journal Office, St. Bartholomew's Hospital, E.C. 1. Telephone: National 4444.



